



**2010 Golf Tournament
Desert Pines Golf Course
Thursday, October 1, 2010
Registration Fee \$295.00**

Golf Registration Form

Name _____ Handicap _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Please pair me with (name & company):

1. _____ 3. _____

2. _____ 4. _____

Sponsors:

YES! I will be a Tee Sponsor for \$350 **YES! My company will donate the following:** _____

Company Name _____ Contact _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Payment Options: Total Amount: \$ _____

Check enclosed (Payable to FiSCA)

Please charge my credit card: **Visa** **MasterCard** **Discover** **American Express**

Card Account # _____ Expiration Date _____ Security Code _____

Name (as it appears on card) _____ Billing Address _____

Signature _____

(By signing, I agree to pay the total amount according to the card issuer's agreement)

Registration Information:

- Register Online: www.fisca.org
- Register by Mail: Mail form with payment by check to: FiSCA, Court Plaza South-East Wing, 21 Main Street, Suite 101, PO Box 647, Hackensack, NJ 07601-0647
- Register by Fax: 201 487-3954

Sorry, no refunds for cancellations!