# Illinois Seed Trade Association, Inc
# Annual Golf Outing

June 27, 2018 – Stone Creek Golf Club, Urbana, Illinois

**Registration due by June 15, 2018**

| Company Name | Contact Person |
|---|---|
| | |

| Mailing Address | Email Address |
|---|---|
| | |

| City, State, Zip | Phone Number | Fax Number |
|---|---|---|
| | | |

**ISTA GOLF REGISTRATION: See Brochure for Details**

***If you are not registering a foursome, golfer(s) will be assigned to a team based on handicap. If no handicap is given, we will assign one to you.**

| | |
|---|---|
| Name: | *Handicap: |
| Name: | *Handicap: |
| Name: | *Handicap: |
| Name: | *Handicap: |

| Total Golfers | Per Person | Golfer Total |
|---|---|---|
| | **$125.00** | |

| | | |
|---|---|---|
| **I would like to sponsor a hole:** | **$100.00** | |
| **I would like to be a hospitality sponsor:** | **$50.00** | |
| **I would like to donate a prize:** | *If checked, you will be contacted via the information above for more details* | ☐ |
| | **GRAND TOTAL** | |

**METHOD OF PAYMENT**

| | |
|---|---|
| ☐ Check Enclosed (**made payable to ISTA**) | Credit Card: ☐ Visa ☐ Mastercard ☐ American Express |
| CC Number: | Exp. Date: |
| Print Name: | Signature: |

**CC billing address the same as company information in first section?** ☐ **Yes** ☐ **No** (***If no, please enter address below***)

| | |
|---|---|
| Billing Street: | City, State, Zip: |

**Mail or fax this form with payment to:**

**Illinois Seed Trade Assn**
**3105 Research Rd**
**Champaign, IL 61822**

**Phone:** 217-359-4053
**Fax:** 217-359-4075

Contact Heather Stone with any questions: hstone@ilcrop.com or 217.359.4053