

QUICK QUOTE FORM

SEND COMPLETED FORM TO: David C. Nelson, CPA      david.nelson@nfp.com      Fax: 775.852.7274

CONTACT INFORMATION

FIRST NAME	LAST NAME	COMPANY
PHONE NUMBER	FAX NUMBER / CELL NUMBER	ADDRESS
EMAIL	CITY, STATE ZIP	

TOURNAMENT INFORMATION

SEND A CONTRACT       SEND A QUOTE

TOURNAMENT DATE	TOURNAMENT NAME	
GOLF COURSE	COURSE STATE	
TOURNAMENT CONTACT	PHONE NUMBER / EMAIL	
NUMBER OF AMATEUR GOLFERS	NUMBER OF CLUB PROS	NUMBER OF TOUR PROS

CONTEST INFORMATION

MAIN PRIZE HOLE NUMBER	MEN'S YARDAGE	WOMEN'S YARDAGE	MAIN PRIZE VALUE	MAIN PRIZE DESCRIPTION

PAYMENT INFORMATION

CHARGE MY CREDIT CARD       SEND INVOICE / PAY WITH A CHECK

CREDIT CARD TYPE:  AMEX       DISCOVER       MASTER CARD       VISA

CREDIT CARD NUMBER	EXPIRATION
NAME OF CARD HOLDER	3 OR 4 DIGIT CCV
BILLING ADDRESS	

CONTEST SIGN INFORMATION

I WILL SEND A LOGO FOR THE TEE-SIGNS

SPONSOR NAME FOR TEE-SIGNS

SHIP TO MY ADDRESS ABOVE       SHIP TO THE GOLF COURSE       SHIP TO THE ADDRESS PROVIDED BELOW