ICSP
INTERNATIONAL CUSTOMER SERVICE PROFESSIONALS

2009 ICSP ANNUAL CORPORATE GOLF CHALLENGE
REGISTRATION FORM
Please fax to Katie Mackay on 03 9853 4190

CONTACT FOR REGISTRATION

Mr/Mrs/Ms Surname: Given Name:

Organisation: Position:

Address:

Suburb:

Phone: Fax: Mobile:

Email:

Team of 4: ☐ **$1250**

Dinner ticket only: ☐ **$100**

Table of 10: ☐ **$950**

Sponsor a Hole ☐ **$300**

Golf Challenge

11.00am	Registration
11.30am	Light Lunch
1.00pm	Shot gun start
6.30pm	Presentation & Charity Dinner

Monday October 5 2009
Huntingdale Golf Club
Windsor Avenue, South Oakleigh
Victoria 3167
Phone (03) 9579 4622

Please be advised of any special dietary requirements:

PAYMENT DETAILS — Please tick: Full payment is required before the event

☐	Direct Deposit	**(Bank: CBA—BSB:063 142—A/C#: 10266212)**	**Total Amount:**
☐	Master Card	(Add 3% surcharge)	Total Amount:
☐	Visa	(Add 3% surcharge)	Total Amount:
☐	AMEX	(Add 3% surcharge)	Total Amount:
☐	Cheque Attached (payable to ICSP)		Total Amount:

A Tax Invoice will be forwarded on receipt of payment. If you require a Tax Invoice for payment **please tick** ☐

Cardholders Name: **Cardholders Signature:**

Credit Card No. **Expiry Date:**

All profits will be donated to Ronald McDonald House— Monash

Refund Policy: Event registration & fees are non—refundable, however are transferable to another person to attend this event only.

ATTENDEES—Please print name & details for Registration

Name of Players & Additional Dinner Guests	Email Address	Phone	Polo Shirt Size	Handi-cap	Dinner Y/N