

Billing Address

## PACE 2018 GOLF Cinnabar Hills Golf Club, San Jose, CA

September 28, 2018

FOURSOME	(\$1,000) before August 1st (\$1,100) after August 1st	SINGLE (\$250) before August 1st (\$275) after August 1st
PLAYER 1		PLAYER 2
Mr. Mrs. Name		OMr. OMrs. Name
Address, City, State, Zip		Address, City, State, Zip
Telephone		Telephone
Email		Email
Shirt Size: ☐ Men or ☐ Women OSM OMED OLRG OXL		Shirt Size: ☐ Men or ☐ Women O SM O MED O LRG O XL
PLAYER 3		PLAYER 4
Mr. Mrs. Name		O Mr. O Mrs. Name
Address, City, State, Zip		Address, City, State, Zip
Telephone		Telephone
Email		Email
Shirt Size: ☐ Men or ☐ Women O <sup>SM</sup> O <sup>MED</sup> O <sup>LRG</sup> O <sup>XL</sup>		Shirt Size: Men or Women OSM OMED OLRG OXL
2018 PACE C	OLF CLASSIC RAFFLE DRAWING	
YES! I would like	• •	
O Raffle Ticket @ \$5 each O 12 Raffle Tickets @ \$50		O Mulligan @ \$5 each (max 2/golfer)
PAYMENT INI	FORMATION	
<ul><li>Each golfer paying individually</li><li>Please find my enclosed check (payable to PACE) \$</li></ul>		O Foursome total payment enclosed
	e on www.pacificautism.org	
O Please charge my credit card \$		O Visa O Mastercard O American Express
Card Holder's Name:		
Credit Card #:		Expiration: (Month/Year) Card Security Code:
Card Holder's Email (Required for credit card payment):		Telephone:

Return this form to: martaweinstock@pacificautism.org or mail to the address below: