

REGISTRATION/PAYMENT FORM:

Date submitted:

_____ Name

_____ Address

_____ City State Zip

() _____
Day Phone Number

Check one: < >Cash < >Check < >Money order < >Credit Card Below

_____ **Credit Card Number (Please Print Clearly) Expiration Date**

Last four *

Sign _____

Phone Charge _____

ALL FEES PAYABLE TO ADVANCED LESSON ACADEMY OF GOLF.

MAJOR CREDIT CARDS ACCEPTED 4% service charged applied: