

Masters Golf Tournament

Please email or print this form and mail the signed agreement to Magnolia Manor Hospitality accompanied by a check for 50% of the total cost made payable to Magnolia Manor Hospitality.

Participant Information

Corporation: _____

Name: _____

Title: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Country: _____

Tel. #: _____

Fax #: _____

Email: _____

Please Mail To:

MAGNOLIA MANOR HOSPITALITY
1450 Greene St.
Suite 95
Augusta, GA 30901

MEMBERSHIP COSTS:

Daily Hospitality

No. People

Total Cost

Monday, April 2 nd	\$ 300.00 per person	_____	\$ _____
Tuesday, April 3 rd	\$ 300.00 per person	_____	\$ _____
Wednesday, April 4 th	\$ 300.00 per person	_____	\$ _____
Thursday, April 5 th	\$ 400.00 per person	_____	\$ _____
Friday, April 6 th	\$ 400.00 per person	_____	\$ _____
Saturday, April 7 th	\$ 400.00 per person	_____	\$ _____
Sunday, April 8 th	\$ 400.00 per person	_____	\$ _____