Reservation Form: SACI's Annual Fall Golf Outing
Thursday AM – September 19, 2019
At the Galloping Hill Golf Course
Kenilworth, NJ

SACI Member and/or Names of Participants	Affiliated and/or Sponsoring Company	Check Applicable Columns Golfer /Diner Only/Sponsor
_____	_____	_____/_____/_____
_____	_____	_____/_____/_____
_____	_____	_____/_____/_____
_____	_____	_____/_____/_____
_____	_____	_____/_____/_____

- **Total number of Attending Golfers _____ @ $165.00 per person = $_____**
- **Total number of Dinner Only Guests _____ @ $45.00 per person = $_____**
- **Total number of Green Sponsorships_____ @ $50 per green sign = $_____**

Total Remittance: $_____

Note Method of Payment:

☐ Visa ☐ M/C ☐ Amex Check ☐

Cardholder Name: _____ Expiration Date: _____

Card #: _____ Security Code: _____

Billing Address Affiliated with Card: _____

City: _____State: _____ Zip Code: _____

Signature: _____

Bank Card Payment: May be e-mailed with this form to: sacimanageronline@gmail.com.
You may also send a hard copy filled & signed form through USPS to the address below.

Check Payment: Must be remitted with this form through USPS only and payable to:
SACI
233 Rock Road #112
Glen Rock, NJ 07452

_____ Check here if you or your company will require a paid receipt for this event