RSVP - PARTICIPATION FORM 2007

Please fill out this registration form and send it in the enclosed return envelope to:

Scott Nelson
UCLA Athletics Department
P.O. Box 24044
Los Angeles, CA 90024-0044

Tournament Entry: $225.00 per golfer

Please reserve _____tournament entries @ $225 each ($65.00 tax-deductible).

NAME: _____

ADDRESS: _____

_____

E-MAIL ADDRESS: _____

PHONE: **(day)** _____**(eve)** _____

GOLF SHIRT SIZE (circle one per participant): S M L XL XXL

OTHERS IN FOURSOME: _____

_____

_____

TEE SIGNS: **$300.00 per tee sign**

Please reserve_____ tee sponsorship(s) @ $300 each (100% tax-deductible).

Name or Message to appear on sign: _____

DINNER ONLY: If you cannot golf, but would like to join us for dinner, the cost is $40.00 per person. Please reserve _____dinner only(s) @ $40 per dinner.

DONATION: I am unable to attend but would like to donate $_____in support of the Men's & Women's Water Polo programs (100% tax-deductible).

PAYMENT OPTIONS: ***Entry must be received by July 13th.***

CHECKS: Please make checks payable to "UCLA Foundation - Water Polo Fund 6073."

CREDIT CARDS: #_____exp:_____/_____