



**FAX ORDERS TO:**

**888.238.3363**

**Need Help? Call: 800.233.3293**

**Email: info@holeinoneprogram.com**

Required Fields are in **BOLD**. PLEASE PRINT CLEARLY.

**DEALER INFORMATION**

Dealer Code

Dealership Name

Sponsor Name for Signage (Dealership Name will be used if left blank)

Contact Name

Address

City Province Postal Code

Phone Fax

Email

**PRICING INFORMATION**

Prize Value (Lease or Ownership)	No. of Players	
	Up to 72	73 to 144
Up to \$10,000	\$260	\$365
\$10,001 - \$15,000	\$310	\$475
\$15,001 - \$20,000	\$365	\$585
\$20,001 - \$25,000	\$420	\$690
\$25,001 - \$30,000	\$475	\$800
\$30,001 - \$35,000	\$530	\$910
\$35,001 - \$40,000	\$585	\$1,020
\$40,001 - \$45,000	\$640	\$1,130
\$45,001 - \$50,000	\$690	\$1,240
\$50,001 - \$55,000	\$750	\$1,345
\$55,001 - \$60,000	\$805	\$1,460

Value based on dealer invoice including freight & taxes. For ownership use full vehicle value. For lease use value of the lease term (monthly payment x 24, 27, 30 or 36). Above pricing based on amateurs only, 165 yard minimum. 150-164 yards will incur an upcharge.

**SHIP TO INFORMATION**

(Only if different than DEALER INFORMATION)

Golf Course/Company Name

Address

City Province Postal Code

Attention Phone

**TOURNAMENT/EVENT ORGANIZER INFORMATION**

Tournament/Event Name

Organizer Name

Organizer Phone Organizer E-mail

Tournament Date(s) Tournament Start Time

Golf Course

City Province

Number of Amateurs Number of Club Pros

Main Prize Hole Number Yardage\*

\* Published pricing based on amateurs only, 165 yard minimum. 150-164 yards will incur an upcharge. Women may shoot from up to 15 yards less.

**PRIZE VEHICLE INFORMATION**

Vehicle Make Vehicle Model

27-Month Lease  
 Ownership  30-Month Lease  
 2-Year Lease  3-Year Lease

EXACT Ownership or Lease Prize Value

Package Price \$

Add \$95.00 if booked within five (5) business days of the event. \$

ORDER TOTAL \$

Promotion Code (if applicable)

**PAYMENT INFORMATION**

Invoice  Visa  MasterCard  American Express

Credit Card Number Exp. Date CVV Code

Name on Card Authorized Signature

Card Billing Address

City Province Postal Code