Please print and fill out the form below completely. A separate form and signature is required for each individual included in the package. Scan and email back to admin@epicgolftravel.com.

2021 GUARANTEED OLD COURSE TEE TIME RESERVATION FORM

MONTH CHOICE 1 ST	2 nd		
HOTEL CHOICE 1 ST	2 nd		
NAME OF INDIVIDUAL GOING:			
CARD HOLDER NAME:			
BILLING ADDRESS:			
CITY:			
TELEPHONE: HOME	CELL	EMAIL	
PAYMENT TYPE: Check Wire	American Express	Visa MasterCard	
I understand that a 3% service charge v	will be added if a credit c	ard is used for payment.	
WIRE INSTRUCTIONS: Epic Golf Travel PO Box 42685, Towso # 5424980818	on, MD 21284 PNC Ban	< Routing # 031000053	3 Acct.
CREDIT CARD: #	Exp. Date _	Sec. Code_	
NAME AS IT APPEARS ON CREDIT CARI	O (Print)		
TOTAL PACKAGE AMOUNT FOR EACH INDIVIDUAL: \$ DEPOSIT (50%) \$			
BOOKING AGREEMENT (each person listed above must sign a separate agreement):			
By signing this booking agreement with agree to the booking Terms & Conditio Old Course Tee Time Terms & Conditio	ons as stated under "Epic	•	
Please charge the booking amount due	e and confirm the booking	g under my name.	
CLIENT SIGNATURE		DATE	