



W AFC CONVENTION 2009 – Illuminators Golf Tournament
SATURDAY - APRIL 25, 2009
JW MARRIOTT, DESERT RIDGE – WILDFIRE GOLF COURSE
 8350 East Marriott Drive, Phoenix, AZ 85054
SHOT-GUN START @ 11:30 AM

You are cordially invited to participate in The Illuminators 2009 Golf Tournament at the W AFC Convention. We are limited to a maximum of 144 players, so we urge you to register early. This is a popular event at an extremely well respected & beautiful course. Many retailers attend this event. Do NOT miss this outstanding event while spending quality time with your favorite retailers.

- Golf Package for Four\$1,600 Golf Package for Two.....\$ 900
- Golf Package for Three.....\$1,275 Golf Package for One.....\$ 500

Entry fees “INCLUDE ALL” on-course contests, green fees, cart, company tee signage, snacks, lunch, & awards.

NAME: _____ COMPANY: _____
 ADDRESS: _____ CITY/STATE/ZIP: _____
 PHONE: _____ FAX: _____ EMAIL: _____

Company Name as you would like it to appear on Tee and/or Green Signage: _____

IMPORTANT: *You may make up your own foursome or the golf committee will assign you to a foursome. Register early, as the 144 player limit will be assigned on a first come, first served basis only. Your check/credit card must cover all persons listed.*

CLUB RENTAL: \$50.00 fee is payable on premise		Circle R or L for each rental
Player #1:	Company: _____	R L
Player #2:	Company: _____	R L
Player #3:	Company: _____	R L
Player #4:	Company: _____	R L

DO NOT INCLUDE PAYMENT WITH YOUR WESTERN FOOD INDUSTRY EXPOSITION REGISTRATION

REMIT PAYMENT TO: THE ILLUMINATORS
Mail check to: THE PERFORMANCE GROUP c/o LISA HERNANDEZ
 14111 FREEWAY DRIVE #407, SANTA FE SPRINGS, CA 90670
 For payment information ONLY, please call, fax, or email Lisa @ Lisah@tpgsaleservices.com
 Phone (562) 293-1380 or Fax (562) 293-1397
For all other Questions or Information needed about the Tournament . . .
Contact Dave Van Winkle @ (562) 293-1380 or fax to (562) 293-1397

Paying by credit card: **PLEASE COMPLETE (Must Print Clearly and Legibly)**

Name on Card: _____

Credit Card Billing Address: _____

Credit Card Number: _____ Exp: _____ Signature: _____

Email address: _____ Daytime phone: _____

NO refunds after . . . APRIL 10, 2009

