



Victory Golf Pass Order Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work or Cell Phone: _____

Email: _____

How did you find out about the Victory Golf Pass? _____

What is your favorite local course to play? _____

What course would you like to see in the Victory Golf Pass? _____

Referred By: _____

Payment Information:

Method of Payment: Cash Check (# _____) Credit (Type: _____)

Credit Card #: _____ -- _____ -- _____ -- _____ Exp: _____ CVC Code: _____
3 or 4 Digit Security Code on Back of Card

Full Name as Appears on Card: _____

Please Print

# of Victory Golf Passes	Pricing	Shipping Cost per Order
1	\$49.95	\$1.86 Regular
2-9	\$44.50 each	\$4.80 Priority
10-19	\$42 each	\$7 Priority
20+	\$40 each	\$10 Priority

_____ # Passes @ \$ _____ = \$ _____

Shipping Cost + \$ _____

Total Amount Due = \$ _____

Signature: X _____ Date: _____

Please make checks payable to Victory Golf Pass. Please allow 7-10 Business Days for Shipping and Processing.

Office Use Only

Victory Golf Pass #: _____ Year: _____ Date Mailed: _____ VGP Rep: _____