



The 5th Annual Central Ohio Aviation Golf Scramble REGISTRATION FORM

Friday, September 14, 2007

Registration Starts 7:00 am, Shotgun Start at 8:00 am

The Landings At Rickenbacker

PLEASE PRINT LEGIBLY

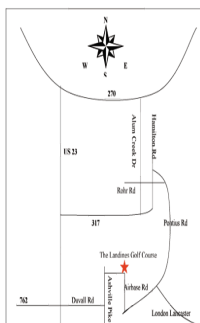


_____ BILL
ALL PLAYERS
TO FIRST
CREDIT CARD

Please complete this form and return it to:

Irv Schumacher
COPAMA
388 Belle Haven
Parkway
Westerville, OH 43082
H 614-882-1465
C 614-327-4004
Fax 614-885-4342
schumachirv@wowway.com

Forms must be returned no later than Friday, Sept. 7th.



Driving Directions:
From US-31, Take Devon Rd East, Turn Left onto Arthur Rd, Turn Right onto Ruler Rd.
From Alan Creek Rd., Turn Left onto Ruler Rd. Take Ruler to Poplar, Turn Right onto Poplar, Turn Right onto Arthur.
*Map Not Drawn to Scale

www.copama.org
www.propilots.org

PLAYER 1 \$50	Name			
	Address			
	City, State, Zip			
	Phone			
	Email			
	Check Enclosed	<input type="checkbox"/>		
	Credit Card Information	Name on Card		
		Card #	Exp	CVC
<i>Billing address for card same as above? If not, please provide billing address below</i>				
PLAYER 2 \$50	Name			
	Address			
	City, State, Zip			
	Phone			
	Email			
	Check Enclosed	<input type="checkbox"/>		
	Credit Card Information	Name on Card		
		Card #	Exp	CVC
<i>Billing address for card same as above? If not, please provide billing address below</i>				
PLAYER 3 \$50	Name			
	Address			
	City, State, Zip			
	Phone			
	Email			
	Check Enclosed	<input type="checkbox"/>		
	Credit Card Information	Name on Card		
		Card #	Exp	CVC
<i>Billing address for card same as above? If not, please provide billing address below</i>				
PLAYER 4 \$50	Name			
	Address			
	City, State, Zip			
	Phone			
	Email			
	Check Enclosed	<input type="checkbox"/>		
	Credit Card Information	Name on Card		
		Card #	Exp	CVC
<i>Billing address for card same as above? If not, please provide billing address below</i>				