

2026 POTENTATE'S GOLF TRIP RESERVATION FORM



Please follow the instructions at the bottom of this page to submit your registration form and payment.

NOBLE		ROOMMATE (if none requested, one will be assigned)	
STREET ADDRESS			
CITY		STATE	ZIP CODE
EMAIL		CELL PHONE	
PLEASE LIST ANY DIETARY RESTRICTIONS			

EMERGENCY CONTACT	
EMERGENCY CONTACT FULL NAME	EMERGENCY CONTACT PHONE

AMOUNT DUE/ENCLOSED	
Total Cost of Golf Trip	\$475.00
Deposit (required with form completion)	\$300.00
AMOUNT YOU HAVE ENCLOSED:	\$
AMOUNT REMAINING (due by 8/1/2026)	\$

ENCLOSED PAYMENT METHOD:

- CASH
 CHECK
 CREDIT/DEBIT CARD

(PLEASE MAKE YOUR CHECK PAYABLE TO ALADDIN SHRINERS and write 2026 GOLF TRIP in the memo line)

INSTRUCTIONS

TO MAIL: Send this form *with check or credit/debit card payment (do not mail cash!)* completed to: Aladdin Shriners, ATTN: GOLF TRIP 2026, 1801 Gateway Circle, Grove City, OH 43123

TO DROP OFF: Bring this completed form *with your cash, check, or credit/debit card payment* to the above address during normal office business hours, MON-FRI, 8:00 am – 4:30 pm.

CREDIT / DEBIT CARD PAYMENT	
CARD NUMBER	
EXP DATE (mm/yy)	CVV
/	
BILLING ZIP CODE	AMOUNT TO CHARGE TODAY
	\$
CARDHOLDER NAME (as it appears on the card)	

By signing this form, you give Aladdin Shriners permission to debit the account you have given here for the amount indicated. This is permission for a **single transaction only**, and does not provide authorization for additional debits or credits to your account, including any remaining balance due. Signing this form also certifies that you are an authorized user of this account and that you will not dispute the payment with your credit card company; so long as the transaction corresponds to the terms indicated on this form.

SIGNATURE
