



**I WOULD LIKE TO REGISTER FOR THE XXXVII EL ANNUAL GOLF  
TOURNAMENT 2010  
November 8<sup>th</sup> - 14<sup>th</sup>**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Member of (Country Club) \_\_\_\_\_

Index: \_\_\_\_\_ Handicap: \_\_\_\_\_ GHIN N° \_\_\_\_\_

Signature: \_\_\_\_\_

**Please make sure you have proper Hdcp-index proof at registration**

**FORM OF PAYMENT**

Cashier's Check \_\_\_\_\_ Money Order: \_\_\_\_\_

Credit Card upon arrival \_\_\_\_\_

Make registration fee payable to:

**EL CID GOLF & COUNTRY CLUB, S.A.**  
**AV. CAMARON SABALO S/N**  
**MAZATLÁN, SINALOA, MÉXICO 82110**  
**ATTN: MARTHA HERRERA**  
[mherrera@elcid.com.mx](mailto:mherrera@elcid.com.mx)