



CALIFORNIA
NATIONS
INDIAN GAMING
ASSOCIATION

16TH ANNUAL WESTERN INDIAN GAMING CONFERENCE

Golf Tournament

Tuesday, February 15, 2011

East Valley Golf Course

GOLF REGISTRATION (Please print or type clearly)

Tribal Government / Company Name: _____

Name: _____ Title: _____

Address: _____

City: _____ State _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Cost for a Foursome: \$2,500

Option A: Provide 2 Names and CNIGA will match you with two tribal representatives in order to complete your foursome

Please list names of your two designated players:

1) _____

2) _____

Option B: Provide all names for your foursome

Please list names of your two designated players:

1) _____

2) _____

3) _____

4) _____

Individual Player: \$700

Name of Player: _____

TO REGISTER

FAX Registration Form & Method of Payment to 916-448-8758

MAIL Registration Form & Payment to :
CNIGA
1415 "L" Street, Suite 1080
Sacramento, CA 95814

Enclosed is my check made payable to: CNIGA

Please charge the following credit card:

Amex Visa MC

Name on Card: _____

Card #: _____

Security Code: _____ Exp. Date: _____

Signature: _____

INTERNAL USE ONLY Date Rec'd: _____ Payment Method: _____ Amount: _____