



**SOUTHEASTERN KFC FRANCHISEE
ASSOCIATION, INC.**

GOLF REGISTRATION FORM

November 8, 2009

Bradshaw Farm

Woodstock, GA

Starting at 10:30 am

NAME	Handicap

A payment for \$ _____ (\$70 per person) payable to SEKFCFA is enclosed. **Deadline to sign up – October 16, 2009 (form & fees)**

Contact Person: _____ Phone: _____ Fax: _____

Franchisee or Company: _____

E-Mail: _____

Method of Payment: _____ **Check** _____ **Credit Card** (American Express, VISA, MasterCard, Discover) – circle one

Credit Card Number _____ Expiration Date _____

CONTACT: JOHN JANUARY – 615-377-9111

**RETURN THIS FORM WITH PAYMENT TO SEKFCFA, INC., P O BOX 1122, DANVILLE, VA. 24543
or FAX TO (434) 836-1624**