

2009 MEMBERSHIP APPLICATION

Classic Office Fax: (407) 938-2958

Classic Office Phone: (407) 938-3501

Regular Mailing Address: Children's Miracle Network Classic
PO Box 10000
Lake Buena Vista, FL 32830

Shipping Address: Children's Miracle Network Classic
(FedEx, UPS only) 3281 Sherberth Road
Kissimmee, FL 34747

PLEASE RSVP AS SOON AS POSSIBLE VIA FAX, FedEx OR MAIL. ALL APPLICATIONS WILL BE HONORED ON A FIRST COME BASIS. FULL PAYMENT IS REQUIRED AT THE TIME THE APPLICATION IS SUBMITTED.

Please accept or decline membership into the Miracle Makers Club: (Please Check One)

I accept, an invitation to become a Miracle Makers Club member to play in the Pro-Am during the Tournament, Thursday/Friday, November 12-13, 2009. Enclosed is my membership application with the membership fee of \$10,000.

*Note: All participants must have a verified USGA handicap of 18 or lower.

Thank you, but I must decline. Please remove me from any further invitations to become a Classic Club member.

Miracle Makers Club Member Information

Miracle Makers Club Member Name _____

Miracle Makers Club Member Birthday (Month/Day/Year) _____

Spouse/Guest Name _____

FOR OFFICE USE ONLY

REC _____ FIN _____ NUM _____ DRC _____

Company (Print exactly as you wish to be listed on Sponsor Board)
Information deadline is September 19, 2009

Business Mailing Address (street address only): _____

City, State, Zip Code: _____

Business Telephone: _____

Business Fax: _____

E-mail Address: _____

Home Mailing Address (street address only): _____

City, State, Zip Code: _____

Home Telephone: _____

I prefer to receive information at: (please check one) Business Home

Payment Information

Check (# _____) Please make checks payable to the WALT DISNEY WORLD Co.

Credit Card – Please charge the full package amount to the credit card below

VISA MASTERCARD AMERICAN EXPRESS DISCOVER DINERS CLUB JCB

Exact Name appearing on credit card (please print) _____

Account # _____

Expiration Date _____

Signature to Charge Credit Card _____

Please Note: Membership packages are subject to a cancellation fee of 100% if notice of cancellation is received after **August 15, 2009**. Please acknowledge understanding of this policy by initial to the right: (_____)

*** Memberships subject to availability and shall not be effective until accepted in writing by an official of the Children's Miracle Network Classic. Membership Fees are nonrefundable in the event the Tournament is canceled due to a "FORCE MAJEURE EVENT" which is beyond our control including, but not limited to, acts of God, inclement weather, epidemics, strikes or other labor difficulties.