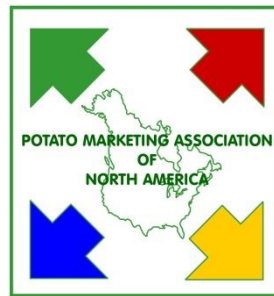


Please fill out (use one per delegate/family)

Mail Payment to: WPVGA
PO Box 327
Antigo, WI 54409



Register by June 16th, 2017

Delegate Registration

Name: _____

Golfing: Yes / No

Email: _____

Potato Tour: Yes / No

Grower Association: _____

Companion Registration

Name: _____

Golfing: Yes / No

Potato Tour: Yes / No

Trolley Tour: Yes / No

Children Registration (photocopy or add list if more room needed)

Name: _____

Age: _____

Trolley Tour: Yes / No

Potato Tour: Yes / No

Name: _____

Age: _____

Trolley Tour: Yes / No

Potato Tour: Yes / No

Registration Fees (inclusive – do not add taxes):

****ALL PAYMENTS SHOULD BE IN US DOLLARS ONLY****

_____ # of Delegate/s at \$250 US each = \$ _____

_____ # of Companion/Children at \$125 US = \$ _____
(Children under 5 free)

_____ # of Companion/Children for Trolley Tour at \$50 US (Incl. lunch) = \$ _____
(Tour subject to change pending participation; 10 person min required)

_____ # for the Potato Tour at \$35 US = \$ _____

_____ # would like to golf at \$85 US = \$ _____

TOTAL \$ _____