



**PIPOC 2017 Golf Challenge Trophy
GOLF TOURNAMENT REPLY FORM**
(Kindly return/fax on or before 1 September 2017)

TO: ORGANIZING COMMITTEE
PIPOC 2017 GOLF CHALLENGE TROPHY
MPOB, No. 6, Persiaran Institusi
Bandar Baru Bangi, 43000 Kajang
Selangor D. E.
(Attn.: Dr. Mohd Hefni Rusli)
Fax. No: 603-89258215
Tel. No: 603-87694473

e-mail: mohd.hefni@mpob.gov.my
mdnaim @mpob.gov.my

Re: REGISTRATION FOR PIPOC 2017 GOLF CHALLENGE TROPHY

I wish to participate in the above tournament and my particulars are as follows:

Name: T-shirt*:.....
 Organization:
 Correspondence Address:
 Telephone/Handphone No.: Fax No:
 Name of Club: Email :
 Membership No: Current Handicap:

II. I wish to sponsor the following golfer(s): Qty: x RM400/USD150 Amount:

	Name	Home Club & Membership No.	Handicap	Fax/Phone No.	T-Shirt Size*
1)					
2)					
3)					
4)					
5)					
6)					
7)					
8)					

Registration is inclusive of 6% GST as imposed by the Malaysian Government.

III. I enclose a cheque/bank draft No.:, in favour of **“MALAYSIAN PALM OIL BOARD”** for RMbeing payment for the golf registration fee.

.....
(Signature/Date)

.....
(Company Chop)

Note: * Please indicate one only: S/M/L/XI/XXL/XXXL (Asian Size)

**** The organizing committee reserves the right to accept, refuse or reject any entry without giving any reasons for such acceptance, refusal or rejection.**