



**PIPOC 2019 Golf Challenge Trophy
GOLF TOURNAMENT REPLY FORM**
(Kindly return/fax on or before 1 October 2019)

TO: ORGANIZING COMMITTEE
PIPOC 2019 GOLF CHALLENGE TROPHY
MPOB, No. 6, Persiaran Institusi
Bandar Baru Bangi, 43000 Kajang
Selangor D. E.
(Attn.: Dr. Mohd Hefni Rusli/En. Mohd Naim bin Hamid)
Fax. No: 603-8925 8215/8922 1742
Tel. No: 603-8769 4473/3845

e-mail:

pipocgolf@mpob.gov.my
mohd.hefni@mpob.gov.my
mdnaim@mpob.gov.my

Re: REGISTRATION FOR PIPOC 2019 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 RM450/USD169 Amount:.....

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

III. PAYMENT DETAILS

Please <input checked="" type="checkbox"/> the payment option	
<input type="checkbox"/>	Enclosed is Cheque No. _____ of RM _____ payable to "Malaysian Palm Oil Board"
<input type="checkbox"/>	Enclosed is Reference No. _____ of RM _____ transferable to Malaysian Palm Oil Board's account number CIMB (8600471810)

.....
(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.**