**2019 GEORGIA INVITATIONAL**

**30th ANNUAL GOLF TOURNAMENT**

**SEPTEMBER 25th and 26th**

**Return to:**

**Museum of Aviation Foundation \* P O Box 2469 \* Warner Robins, GA 31099**

**PHONE (478) 926-4242 or FAX (478) 923-8807**

**or E-MAIL: Dan Hart at** [**dan.hart@museumofaviation.org**](mailto:dan.hart@museumofaviation.org)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PRINT FULL NAME AS IT APPEARS ON YOUR DRIVER’S LICENSE** | | | | |
| **NAME:** | | | | |
| **DL NUMBER: STATE OF ISSUE: DOB:** | | | | |
| **HOME ADDRESS:** | | | | |
| **CITY:** | | **STATE:** | | **ZIP:** |
| **EMAIL ADDRESS:** | | | | |
| **PHONE NUMBERS:** | | | | |
| **HOME:** | **CELL:** | | **SHIRT SIZE:** | |

**CHECK SHIFT(S) YOU ARE ABLE TO VOLUNTEER**

**IF POSSIBLE, PLEASE WORK MORE THAN ONE SHIFT**

|  |  |  |
| --- | --- | --- |
| * **WEDNESDAY 10:00 AM** | * **THURSDAY 6:00 AM** |  |

**JOB PREFERENCE ~ PLEASE SELECT 1st, 2nd AND 3rd CHOICE**

|  |  |  |
| --- | --- | --- |
| **GREETER** | **SPOTTER** | **DRIVING RANGE** |
| **BAG CHECK IN** | |  |
| **SPECIAL REQUEST:** | | |

**PLEASE COMPLETE ALL BLANKS**

**Date received by Museum\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**