

Bill Balash Golf

Forging Business Relationships®



Custom Program Design Form

Return By Fax To: 772-545-4910

Contact Person: _____

Phone/Email: _____

Metro areas of interest: _____

Additional areas: _____

Days per location: 1 _____ 2 _____ 3 _____ 4 _____ 5 _____

Comments: _____

How would you like the day structured? Standard One Day Corporate Program

Other: (See Enclosed Program Designs) _____

What days of the week works best for your group? _____

Comments: _____

What is your targeted budget range? Per person: _____ Per event day: _____

Food and beverage requirements: Morning Snack _____ Lunch _____

Refreshments _____ Snacks _____

Comments: _____

Are you interested in a Short-Game Contest at the conclusion of the day? Yes _____ No _____

Will Tee Times be need at the conclusion of the day? Yes _____ No _____

Are you interested in branded gift items? Caps _____ Shirts _____ Golf Balls _____

Bag Towels _____ Shoe Bags _____ Other _____

Are you interested in golf equipment as gift items? Yes _____ No _____

Comments: _____

Are you interested in Nike Golf Custom Fitting? Yes _____ No _____

What is the objective of the day/s? _____

Comments: _____

Who will be your guests? _____

Comments: _____

Will there be corporate representatives present for the programs? _____

Additional Comments: _____

