

RETURN THIS SECTION WITH PAYMENT

(Print this form and mail to address at bottom of page)

Last Name: _____ FirstName: _____

Age: _____ Birth Date: _____

Additional Family Member's Name: _____

Age: _____ Birth Date: _____

Additional Family Member's Name: _____

Age: _____ Birth Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (____) _____

(Please Check)

Season Pass - Single _____ Additional Family Member _____ One Additional Family _____

Senior Pass - Single _____ Additional Family Member _____

Bargain Individual _____ Additional Family Member _____

Student Pass _____

TOTAL AMOUNT ENCLOSED \$ _____

Payment Method (Please Check): Cash _____ Check _____ Credit Card _____

Signature: _____

If paying by Credit Card, please provide the following information.

Name as it appears on the card: _____

Credit Card Number: _____ Expiration Date: _____

Please Circle: VISA or MASTERCARD

Make Check payable to Whetstone Golf Course.
Mail Registration and Payment to:
(OR PAY AT THE COURSE EARLY)

Clarence Perry
301 Orchard Drive
Greenville, Ohio 45331

*If you have any questions, please contact Clarence Perry at (937) 423-4386 Or Rick Smith at (740-607-4123).
Weather permitting; the pro shop may be open on various days (Please Call) in which you can pay for your pass,
otherwise please mail.*