

# SEASIDE TERRACES RESERVATION FORM

## GUEST BILLING ADDRESS

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Alt. Telephone \_\_\_\_\_  
Email \_\_\_\_\_

## GUEST SHIPPING ADDRESS IF DIFFERENT THAN BILLING ADDRESS

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please complete this form and return by email, fax or mail to:

Email  
John McKenzie  
jmckenzie@dlovefoundation.com

Fax  
(912) 634-3276

Mail  
Davis Love Foundation  
100 Retreat Ave.  
St. Simons Island, GA 31522

Please make checks payable to:  
Davis Love Foundation

## PACKAGE DETAILS:

- Multiple viewing platforms strategically located around the Seaside Course at Sea Island Golf Club
- Complimentary food and beverages, including Grab and Go menu items and a full bar service
- VIP Parking Passes available with weekly ticket packages

## TICKET FULFILLMENT

*Tickets are only available for pick-up at the Tournament Office starting September 15th through October 31st. All orders placed after October 31st will be placed at Will Call and are not available for pick up at the Tournament Office.*

## WILL CALL HOURS – Located at St. Simons Island Airport

Monday, November 14 – Tuesday, November 15 from 10am–4pm

Wednesday, November 16 – Saturday, November 19 from 7am–4pm

Sunday, November 20 from 7am to 1pm

\*Proper hospitality ticket required for access to all hospitality venues regardless of age.

## SEASIDE TERRACES PACKAGE OPTIONS:

- I would like to purchase \_\_\_\_\_ **Thursday** ticket(s)
- I would like to purchase \_\_\_\_\_ **Friday** ticket(s)
- I would like to purchase \_\_\_\_\_ **Saturday** ticket(s)
- I would like to purchase \_\_\_\_\_ **Sunday** ticket(s)
- I would like to purchase \_\_\_\_\_ **Weekly** package(s)- Thursday to Sunday

## PRICING SCHEDULE

**First Release Pricing (until Nov 13): \$250 Per Ticket / Per Day Pricing**

**Tournament Week Pricing (Nov 14– Nov 20): \$300 Per Ticket / Per Day**



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## PAYMENT METHOD

- Pay with Credit Card  Check Enclosed

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_

Name on Credit Card \_\_\_\_\_ Signature \_\_\_\_\_

I understand and agree to the following terms and conditions: full, non-refundable payment required in advance. No trademarks, names or logos relating to The RSM Classic may be used without prior written consent. No refunds in the event the tournament is canceled due to weather or any other condition beyond reasonable control. The Davis Love Foundation is a 501(c)(3) non-profit organization.

