



Georgia Surgical Society
Office of the Secretary-Treasurer
95 Collier Rd
Suite 6015
Atlanta, Georgia, 30309
Phone: 404-355-4848
Secure Fax: 404-614-4257

Georgia Surgical Society

EXHIBITOR SPORTING REGISTRATION FORM

_____ I plan to attend the meeting of the Georgia Surgical Society to be held at The Westin Resort, Jekyll Island, Georgia, on September 13-16, 2018.

Golf (includes green fees & cart)	_____ \$60 per person
Fishing Tournament	_____ \$150 per person
Skeet Shooting	_____ \$100 per person
Beach walk/ Run	_____ (No Fee)
Tennis	_____ (No Fee)
Babysitting Service	_____ (No Fee)

Total amount enclosed: \$ _____

Exhibitor Name: _____

Mailing Address: _____

Phone #: _____ Fax #: _____

Contact Person: _____

Contact Phone # _____

Email Address: _____

Checks should be made payable to: The Georgia Surgical Society

And mailed to: 95 Collier Road, Suite 6015 Atlanta, GA 30309

You may also fax your payment in using our Secure Fax: 404-614-4257

Credit Card Payment: _____ Visa _____ MasterCard _____ American Express

Card Number: _____ Exp. Date: _____ Security Code: _____

Name on Card: _____

Signature: _____
