



GOLF CART REQUEST



Committee: _____

Contact Person: _____

PLS&R Supply: **Qty:** _____

Personal: **Qty:** _____

(Check one) Please provide a copy of your insurance to the office before Sept 1

2 seater# _____ **4 Seater#** _____ **Utility Cart#** _____

Rodeo: **Qty:** _____

BBQ Cook-off: **Qty:** _____

General Chairman: _____
(signature) (Date)

Officer in Charge: _____
(signature)

(Golf Cart Committee Use Only)

Approved: _____

Rejected: _____