

## Golf Day Reservation - March 13, 2008 (Thursday)

**To: Hong Kong Venture Capital And Private Equity Association Limited**  
4010 Jardine House,  
1 Connaught Place,  
Central, Hong  
Tel: (852) 2845 6100 / 2147 9540 Fax: (852) 2537 0086

☐ **Register as a team of Four**

1. Company Name: \_\_\_\_\_  
Name (Mr./Ms.): \_\_\_\_\_ **Handicap Index (must be provided):** \_\_\_\_\_  
Address: \_\_\_\_\_  
Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_
2. Company Name: \_\_\_\_\_  
Name (Mr./Ms.): \_\_\_\_\_ **Handicap Index (must be provided):** \_\_\_\_\_  
Address: \_\_\_\_\_  
Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_
3. Company Name: \_\_\_\_\_  
Name (Mr./Ms.): \_\_\_\_\_ **Handicap Index (must be provided):** \_\_\_\_\_  
Address: \_\_\_\_\_  
Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_
4. Company Name: \_\_\_\_\_  
Name (Mr./Ms.): \_\_\_\_\_ **Handicap Index (must be provided):** \_\_\_\_\_  
Address: \_\_\_\_\_  
Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

☐ **Register as Individual**

Company Name: \_\_\_\_\_  
Name (Mr./Ms.): \_\_\_\_\_ **Handicap Index (must be provided):** \_\_\_\_\_  
Address: \_\_\_\_\_  
Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

☐ **Register for the putting contest @HK\$400 as a team of 4 or @HK\$100 as individual**

Check payment in favor of **"Hong Kong Venture Capital And Private Equity Association Ltd."** attached:

Member @HK\$1800 per person x \_\_\_\_\_ = HK\$ \_\_\_\_\_  
Non-member @HK\$2200 per person x \_\_\_\_\_ = HK\$ \_\_\_\_\_  
(Caddies will be for players own account)

**Group Golf Clinic for beginners:** (Subject to no. of participants)

Member @HK\$700 \_\_\_\_\_ Non-member @HK\$1000 \_\_\_\_\_

**Total Amount: HK\$** \_\_\_\_\_

Please note that no-shows will be charged. Cancellations cannot be accepted less than 5 working days before the event.