



2007 - 2008 Winter Series Membership Application

Remit Forms & Fees to: Adams Pro Tour Series, 1732 E. Branch Hollow, Carrollton, TX 75007
972-492-4777 office phone, 972-395-8812 fax

Membership Fees: \$300 for Renewal Members, \$400 for New Members

Method of Payment: Check # _____ Cash _____ MC/Visa/Amx* _____ Amount Enclosed _____

*NOTE: Checks will not be accepted without Drivers license #, and credit card # with credit line. There is a 3% charge for cc.

PLAYER INFORMATION (If you are a returning member, fill out any changed information and sign)

PLAYER'S NAME: _____ SS # OR TAX ID #: _____
Mailing Address: _____ CITY _____ STATE _____ ZIP _____
(Additional Address: _____ CITY _____ STATE _____ ZIP _____)
HOME PHONE # _____ CELL PHONE# _____
PLAYER'S DL # _____ STATE _____ EMAIL ADDRESS _____
MC/VISA/AMX # _____ exp _____ 3 or 4 digit access code _____
CARDHOLDER'S NAME _____ CARDHOLDER'S SIGNATURE _____

PLAYER PROFILE - Please fill out completely as it will be posted on the Adams Pro Tour Series website

HEIGHT: _____ WEIGHT: _____ DATE OF BIRTH _____ AGE: _____ BIRTHPLACE: _____
CITIZENSHIP: _____ Hometown (where you want to be listed from): _____
MARRIED / SINGLE (circle one) WIFE'S NAME: _____ CHILDREN: _____
HOMETOWN NEWSPAPER: _____ COLLEGE: _____ MAJOR: _____
GOLF CLUB AFFILIATION (current or past): _____ YEAR TURNED PRO: _____ COACH/PRO: _____
OTHER INTERESTS: _____
CAREER HIGHLIGHTS: _____

LOW ROUND PROFESSIONAL: _____ when and where: _____
HAVE YOU PARTICIPATED IN PGA QUALIFYING SCHOOL? _____ IF YES, WHEN: _____
EMERGENCY CONTACT: _____ PHONE #: _____
PREFERRED MANUFACTURERS: Please fill out completely as this will be used by all manufacturers
Bag: _____ Ball: _____ Clothes: _____ Driver: _____ Glove: _____
Hat: _____ Irons: _____ Putter: _____ Shoes: _____ 3-wood: _____
Hybrid Club: _____ Sunglasses: _____ Yardage Device: _____

MEDIA FORM AND PLAYER AGREEMENT

I HEREBY GRANT THE ADAMS PRO TOUR SERIES THE RIGHT TO ANY PERSONAL OR HISTORICAL INFORMATION HEREIN FOR MEDIA AND PUBLIC RELATIONS USE. I AGREE TO COMPLY WITH THE POLICIES AND GUIDELINES SET FORTH BY THE ADAMS PRO TOUR SERIES AND UNDERSTAND THAT MY MEMBERSHIP FEE IS NON-REFUNDABLE AFTER OCTOBER 31, 2007. I UNDERSTAND THAT I AM NOT ELIGIBLE FOR ANY PRIZES OTHER THAN THE PURSE MONEY, DAY MONEY, OR SKINS IN THE EVENTS IN WHICH I PARTICIPATE. I UNDERSTAND THAT AS A MEMBER OR PLAYER, I AM AN INDEPENDENT CONTRACTOR, AND NOT AN EMPLOYEE OF THE ADAMS PRO TOUR SERIES. AS AN INDEPENDENT CONTRACTOR, I AM RESPONSIBLE FOR MY OWN PERSONAL LIABILITY INSURANCE. I AGREE TO HOLD HARMLESS THE ADAMS PRO TOUR SERIES AND ITS SPONSORS FROM RESPONSIBILITY FOR ANY INJURY, DAMAGES, AND/OR MEDICAL EXPENSES INCURRED BY ME, ON OR OFF THE GOLF COURSE, DURING MY INVOLVEMENT WITH THE TOUR.

Signature: _____ Date: _____

Membership application will not be accepted without signed Media Form, Player Agreement, and payment