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Please count on my donation for: ___ 3 yrs ___ 2 yrs ___ 1 yr

Name of 2nd Member (Associate Level & Above) _____

I wish to pay via:

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Please return this form to

World Golf Hall of Fame attn: FHOF 1 World Golf Place St. Augustine, FL 32092

Question? 904-940-4129 during business hours

On-line form