

Date: _____



2019 Enagic 45th Anniversary PARTICIPATION APPLICATION (FORM A) <small>*Fill in FORM B for family members</small>				
Applicant's Name (As on Passport)	First & Middle Name		Last Name	
Distributor ID & Rank	ID No.		Rank	
E8PA Membership	Do you have an E8PA membership card? <input type="checkbox"/> YES / <input type="checkbox"/> NO			
	<input type="checkbox"/> BLACK <input type="checkbox"/> PLATINUM <input type="checkbox"/> GOLD <input type="checkbox"/> SILVER <input type="checkbox"/> BRONZE <input type="checkbox"/> CRYSTAL			
Mailing Address	Address			
	State Province			
	Country		Zip Code	
Contact Info	[Home]		[Mobile]	
	Email Address			
Golf Participation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No Rental	<input type="checkbox"/> Rental (Right)	<input type="checkbox"/> Rental (Left)
<small>*Please circle your ticket price</small>	Admission Fee(USD)	Regular	E8PA Cardholder	Child
	Application received by April 21st, 2019	\$169	\$149	ages 0-3 ages 4-12
	Application received by June 18th, 2019	\$189	\$169	\$0 \$99
	At the Door <small>* To purchase tickets at the door, please visit Help Desk.</small>	\$209	\$189	
"My Total"	_____ USD			
Cancellations: No cancellation will be accepted for this event. Sorry for inconvenience.				

<small>*\$99 for children ages 4-12. *Please complete Form B for additional tickets.</small>					
Total No. of Tickets: 4 to 12yrs () 0-3yrs ()					
\$	_____ USD	+	_____ USD	=	_____ USD
	<small>"My Total"</small>		<small>Other Total (FORM B)</small>		<small>Grand Total</small>

* I am submitting FORM A & _____ pages of FORM B.

ENAGIC INTERNAL USE ONLY	
Payment Received	(Month / Day / Year) _____ Branch: _____
Amount	Method: <input type="checkbox"/> Card <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Bank _____ USD Staff: _____

Date: _____



2019 Enagic 45th Anniversary
PARTICIPATION APPLICATION (FORM B) *Must submit with FORM A

Applicant's Name (As on FORM A)	First & Middle Name	Last Name	Distributor's ID# / Rank (ID No. _____ / Rank _____)
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1	Name (As on Passport)	First & Middle Name	Last Name
	Guest Type	<input type="checkbox"/> Guest <input type="checkbox"/> Distributor (ID No. _____ / Rank _____)	
	Members of E8PA Cardholders	Cardholder's ID No. _____	<input type="checkbox"/> BLACK <input type="checkbox"/> PLATINUM <input type="checkbox"/> GOLD <input type="checkbox"/> SILVER <input type="checkbox"/> BRONZE <input type="checkbox"/> CRYSTAL
	Contact Info	[Home] _____	[Mobile] _____
	Golf Participation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No Rental <input type="checkbox"/> Rental (Right) <input type="checkbox"/> Rental (Left)
	Ticket Type	<input type="checkbox"/> Adults(13yrs +) <input type="checkbox"/> 4 to 12yrs (\$99) <input type="checkbox"/> 0-3yrs (FREE)	US\$ _____

2	Name (As on Passport)	First & Middle Name	Last Name
	Guest Type	<input type="checkbox"/> Guest <input type="checkbox"/> Distributor (ID No. _____ / Rank _____)	
	Members of E8PA Cardholders	Cardholder's ID No. _____	<input type="checkbox"/> BLACK <input type="checkbox"/> PLATINUM <input type="checkbox"/> GOLD <input type="checkbox"/> SILVER <input type="checkbox"/> BRONZE <input type="checkbox"/> CRYSTAL
	Contact Info	[Home] _____	[Mobile] _____
	Golf Participation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No Rental <input type="checkbox"/> Rental (Right) <input type="checkbox"/> Rental (Left)
	Ticket Type	<input type="checkbox"/> Adults(13yrs +) <input type="checkbox"/> 4 to 12yrs (\$99) <input type="checkbox"/> 0-3yrs (FREE)	US\$ _____

3	Name (As on Passport)	First & Middle Name	Last Name
	Guest Type	<input type="checkbox"/> Guest <input type="checkbox"/> Distributor (ID No. _____ / Rank _____)	
	Members of E8PA Cardholders	Cardholder's ID No. _____	<input type="checkbox"/> BLACK <input type="checkbox"/> PLATINUM <input type="checkbox"/> GOLD <input type="checkbox"/> SILVER <input type="checkbox"/> BRONZE <input type="checkbox"/> CRYSTAL
	Contact Info	[Home] _____	[Mobile] _____
	Golf Participation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No Rental <input type="checkbox"/> Rental (Right) <input type="checkbox"/> Rental (Left)
	Ticket Type	<input type="checkbox"/> Adults(13yrs +) <input type="checkbox"/> 4 to 12yrs (\$99) <input type="checkbox"/> 0-3yrs (FREE)	US\$ _____

4	Name (As on Passport)	First & Middle Name	Last Name
	Guest Type	<input type="checkbox"/> Guest <input type="checkbox"/> Distributor (ID No. _____ / Rank _____)	
	Members of E8PA Cardholders	Cardholder's ID No. _____	<input type="checkbox"/> BLACK <input type="checkbox"/> PLATINUM <input type="checkbox"/> GOLD <input type="checkbox"/> SILVER <input type="checkbox"/> BRONZE <input type="checkbox"/> CRYSTAL
	Contact Info	[Home] _____	[Mobile] _____
	Golf Participation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No Rental <input type="checkbox"/> Rental (Right) <input type="checkbox"/> Rental (Left)
	Ticket Type	<input type="checkbox"/> Adults(13yrs +) <input type="checkbox"/> 4 to 12yrs (\$99) <input type="checkbox"/> 0-3yrs (FREE)	US\$ _____

Grand Total
US\$ _____

* I am submitting _____ pages of FORM B.

ENAGIC INTERNAL USE ONLY		
Payment Received	(Month / Day / Year)	Branch:
Amount	Method : <input type="checkbox"/> Card <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Bank USD	Staff: