



EMG, LLC. GROUP EVENT REQUEST FORM

Please complete this form and bring it to our office during regular office hours to set up your group event.

www.enterpriseminigolf.com

CONTACT PERSON FOR EVENT:

NAME _____

EMAIL _____

PHONE NUMBER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____



TELL US WHEN YOU WOULD LIKE TO HAVE THE EVENT:

1st CHOICE DATE _____

PREFERRED TIME _____ Morning (not available on Sunday) _____ Afternoon _____ Evening

2nd CHOICE DATE _____

PREFERRED TIME _____ Morning (not available on Sunday) _____ Afternoon _____ Evening

APPROXIMATELY HOW MANY GUESTS WILL BE INVITED TO THE EVENT?

_____ 10-15 guests _____ 16-20 guests _____ 21-25 guests _____ 25-30 guests

_____ PLEASE CALL IF MORE THAN 30 – Call 334-406-3651.

Other information that you would like to share as we help plan for your party:

FEES & COSTS

_____ Yes, I agree to pay \$30 for 2 hours use of EMG, LLC. Party Pavilion

_____ Yes, I agree to pay regular price of golf admission for each guest

I will pay by... (select one)

_____ credit/debit card

_____ check

_____ cash.

_____ YES, I understand that submitting this form is simply requesting that a group event be hosted at EMG, LLC. I also understand that a staff member of EMG, LLC. will contact me and finalize these plans. Nothing is final until the event is booked through an EMG, LLC. staff member.

SIGNATURE CONTACT PERSON _____ DATE _____