



West Coast Tour, LLC Tournament Entry Form

Name: _____ Cell: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address*: _____

2010 WCT Member: Y N

SSN or TIN** (required for pros): _____

*Email confirmation will be sent upon Tournament Entry Form arrival in WCT office.

**Professionals will receive checks and will be subject to a 1099 at year-end. If no SSN or TIN is on file, 30% of earnings will be withheld for taxes.

Tournament Information

Tournament Site: _____ Date: _____

I agree to abide by the Policies and Procedures set forth by West Coast Tour, Inc. I acknowledge that failure to follow these rules may result in penalties, fines and/or forfeiture of my membership with West Coast Tour, LLC. The Tour is NOT liable for any damage, injury, misconduct, loss or theft as a result of participating in an event.

Signature _____ Date _____

Make Checks Payable to **West Coast Tour** or fill in Credit Card Information below - 3% surcharge on all credit cards.

Credit Card # (Visa/MC only): _____ Exp: _____ CID #: _____

Name on Card: _____

Signature: _____

WCT President and Co-Director: J.P. Brown
P.O. Box 203 □ 13502 Whittier Blvd Ste H
□ Whittier, CA □ 90605-1944

□ Cell: 562-713-2212 □ Website: www.wc-tour.com □ E-mail: jbrown@wc-tour.com