



# 2010 Order / Location Form Men's Pool Tournament Kit



ICMOA Operator Member Company: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Ordered by \_\_\_\_\_ Phone: \_\_\_\_\_  
(operator or employee name)

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Cost Per Kit: \$200.00 + .35 tax = \$200.35 (2 Tournaments per kit)**  
**Cost Per 1/2 Kit: \$100.00 + .17 tax = \$100.17 (1 Tournament per 1/2 kit)**

Payment enclosed: \_\_\_\_\_  Please Invoice

**FAX COMPLETED FORM TO: 815.364.0364**

**Tournament #1 will be run at following location: (Please Print Clearly)**

Location Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Tournament Start Date: \_\_\_\_\_

**Tournament #2 will be run at following location: (Please Print Clearly)**

*(only fill in if buying a full kit)*

Location Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Tournament Start Date: \_\_\_\_\_

*Complete **all** information. Your order will be shipped when this completed form is received.*

Only one (1) order per form. This form may be copied for additional orders

**ICMOA • P.O. Box 167 • Morris, IL 60450**  
**Phone 815.416.0741 • Fax 815.364.0364**