



Awards Form

Exclusive Sports Marketing, Inc.
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Please Fax or Mail with Payment.

EVENT _____

NAME _____

DIVISION _____

PLACE _____

ADDRESS _____

PHONE _____

PAYMENT

CREDIT CARD

CHECK

(circle one)

CHECK # _____

CC# _____ Exp _____

BILLING _____

ADDRESS

(if different than above)

Signature: _____

CHECKS PAYABLE TO ESM
PLEASE ALLOW 2 WEEKS FOR DELIVERY

AWARDS MAY BE CLAIMED UP TO TWO WEEKS FOLLOWING THE EVENT. AFTER TWO WEEKS PRICE SUBJECT TO CHANGE. ALL AWARDS MUST BE CLAIMED NO LATER THAN TWO WEEKS FOLLOWING THE CHAMPIONSHIP WEEKEND EVENT.