



Alabama Podiatric Medical Association 2026 Golf Registration Form

May 1, 2026
The Baytowne Course
Sandestin Golf and Beach Resort
Destin, Florida

Player's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: _____ Fax: _____

Email: _____

Golf Registration Fees \$135.00 (No refunds will be issued)

Make check payable to: Alabama Podiatric Medical Association
PO Box 81
Locust Fork, AL 35097
Fax (205) 681-0194

Or

☐ American Express ☐ Visa ☐ MasterCard ☐ Discover

Account # _____

Expiration Date: _____ Sec Code _____

Signature: _____

Please list any special player requests. Every effort will be made to put players together as requested.