

2025 KPMA Fall Meeting & Golf Classic Registration Form



Check
Website for
Agenda,
Hotel, Reg
Rules &
Details

Company Name _____

Person Completing Form _____

Phone _____ Email _____

☐ Golf with Meeting
\$305/per person

Attendee's Email Address -
Required

☐ Meeting Only - Includes
Reception \$170/per
person

1.) _____

1.) _____

1.) _____

2.) _____

2.) _____

2.) _____

3.) _____

3.) _____

3.) _____

4.) _____

4.) _____

4.) _____

☐ Preferred foursome above. Please put a * by
anyone **you are not intending to pay for** and
make sure they are registering themselves.

Spouse/Guest \$85/per
person - reception only

☐ _____

Total Payment Amount

Payment Method

☐ Credit Card, Please Call for Card Number

☐ Enclosed is my check*

Name on Card

Credit card number

Expiration Date

BECOME A
Sponsor

☐ INTERESTED IN OPTIONS

Only a few left

☐ PRIZE TABLE SPONSOR

\$200 or more \$ _____

Inquire about full list of sponsorships at jonna.jackson@kpma.org.

Please fax registration form to 859.406.1009 with credit card payment details or email to kpma@kpma.org. This is a member-only event. *Check payments should be sent to: KPMA Golf Classic, 2365 Harrodsburg, Road, Suite A325, Lexington, Ky 40504. Space is limited for this event. All event details are online at www.kpma.org.