



800-HOLE-IN-1™
800-465-3461

PO Box 1320
FLOWERY BRANCH
GA 30542

TARGET HOLE PRIZE NOTIFICATION OF CLAIM

INSURED: _____ DATE OF EVENT: _____
CONTACT: _____ EVENT LOCATION: _____
PHONE: _____ FAX: _____

DOCUMENTATION NEEDED:

1. Winner:

NAME: _____ DAYTIME PHONE: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____

3. Hole-in-1 Hole Number: _____ **Yardage:** _____ **Prize Won:** _____

2. Other members of the winner's playing group:

NAME: _____ DAYTIME PHONE: _____
NAME: _____ DAYTIME PHONE: _____
NAME: _____ DAYTIME PHONE: _____

3. Tournament Chairperson

NAME: _____ DAYTIME PHONE: _____

4. The non-playing witnesses:

NAME: _____ DAYTIME PHONE: _____
NAME: _____ DAYTIME PHONE: _____

5. Golf club pro or director of golf:

NAME: _____ DAYTIME PHONE: _____

6. A copy of the ORIGINAL signed scorecard, indicating the hole-in-1. (Scorecard will be returned upon request.)

7. Tournament pairing sheets.

COMMENTS: _____



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TOURNAMENT CHAIRPERSON QUESTIONNAIRE

NAME: _____ DOB: _____

ADDRESS: _____

DAYTIME PHONE #: _____ FAX #: _____

CELL PHONE #: _____ EVENING PHONE #: _____

EMAIL ADDRESS: _____

TOURNAMENT DATE: _____ # GOLFERS IN TOURNAMENT: _____

HOLE NUMBER: ____ TOURNAMENT LOCATION: _____

HOLE-IN-1 PRIZE SPONSOR _____

PLEASE DESCRIBE WHAT HAPPENED: _____

WERE YOU STATIONED AT THE HOLE? _____

WHAT WAS THE YARDAGE ON THE HOLE-IN-1? _____

WHO SET THE YARDAGE MARKERS? _____

ARE THERE ANY OTHER COMMENTS YOU WOULD LIKE TO MAKE? _____

INSURANCE FRAUD NOTICE

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act. A fraudulent insurance act is a crime and may be subject to a civil penalty and a criminal penalty.

INVESTIGATION AND POLYGRAPH NOTICE

Upon receipt of Questionnaire, TSI Sports may conduct a reasonable investigation. This may include, but is not limited to, requiring all attestors to submit to and pass (i.e. no attempted deception) a polygraph examination.

I, _____, DO SOLEMNLY SWEAR THAT THE
ABOVE INFORMATION IS TRUE AND FACTUAL TO THE BEST OF MY KNOWLEDGE.

DATED: _____

SIGNED: _____



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CLAIMANT QUESTIONNAIRE

NAME: _____ DOB: _____

ADDRESS: _____

DAYTIME PHONE #: _____ FAX #: _____

CELL PHONE #: _____ EVENING PHONE #: _____

EMAIL ADDRESS: _____

TOURNAMENT DATE _____ TOURNAMENT LOCATION _____

PLEASE DESCRIBE WHAT HAPPENED: _____

DID YOU SEE YOUR BALL GO INTO THE HOLE? _____

WHAT IS YOUR USGA INDEX OR APPROXIMATE HANDICAP? _____

WHICH CLUB DID YOU USE? _____

WHAT DID YOU ESTIMATE YOUR YARDAGE TO BE? _____

ARE THERE ANY COMMENTS YOU WOULD LIKE TO MAKE? _____

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ABOVE INFORMATION IS TRUE AND FACTUAL TO THE BEST OF MY KNOWLEDGE.

DATED: _____ SIGNED: _____

Subscribed and sworn before me
this ____ day of _____, 20 ____.

Notary Public: _____

My commission expires: _____



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WITNESS QUESTIONNAIRE NUMBER 1

NAME: _____ DOB: _____

ADDRESS: _____

DAYTIME PHONE #: _____ FAX #: _____

CELL PHONE #: _____ EVENING PHONE #: _____

EMAIL ADDRESS: _____

TOURNAMENT DATE _____ TOURNAMENT LOCATION _____

PLEASE DESCRIBE WHAT HAPPENED: _____

WHERE WERE YOU STATIONED? _____

DID YOU SEE THE BALL GO INTO THE HOLE? _____

WHO REMOVED THE BALL FROM THE HOLE? _____

DID THE PRECEDING GROUP WITNESS THE ACE? _____

WHO ASKED YOU TO BE A WITNESS? _____

WHAT WAS THE YARDAGE ON THE HOLE & WHERE WERE TEE BLOCKS POSITIONED? _____

ARE THERE ANY OTHER COMMENTS YOU WOULD LIKE TO MAKE? _____

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WITNESS QUESTIONNAIRE NUMBER 2

NAME: _____ DOB: _____

ADDRESS: _____

DAYTIME PHONE #: _____ FAX #: _____

CELL PHONE #: _____ EVENING PHONE #: _____

EMAIL ADDRESS: _____

TOURNAMENT DATE _____ TOURNAMENT LOCATION _____

PLEASE DESCRIBE WHAT HAPPENED: _____

WHERE WERE YOU STATIONED? _____

DID YOU SEE THE BALL GO INTO THE HOLE? _____

WHO REMOVED THE BALL FROM THE HOLE? _____

DID THE PRECEDING GROUP WITNESS THE ACE? _____

WHO ASKED YOU TO BE A WITNESS? _____

WHAT WAS THE YARDAGE ON THE HOLE & WHERE WERE TEE BLOCKS POSITIONED? _____

ARE THERE ANY OTHER COMMENTS YOU WOULD LIKE TO MAKE? _____

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PLAYING PARTNER QUESTIONNAIRE NUMBER 1

NAME: _____ DOB: _____

ADDRESS: _____

DAYTIME PHONE #: _____ FAX #: _____

CELL PHONE #: _____ EVENING PHONE #: _____

EMAIL ADDRESS: _____

TOURNAMENT DATE _____ TOURNAMENT LOCATION _____

PLEASE DESCRIBE WHAT HAPPENED: _____

WHERE WERE YOU STATIONED? _____

DID YOU SEE THE BALL GO INTO THE HOLE? _____

WHO REMOVED THE BALL FROM THE HOLE? _____

DID THE PRECEDING GROUP WITNESS THE ACE? _____

WHAT WAS THE YARDAGE ON THE HOLE & WHERE WERE TEE BLOCKS POSITIONED? _____

ARE THERE ANY OTHER COMMENTS YOU WOULD LIKE TO MAKE? _____

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PLAYING PARTNER QUESTIONNAIRE NUMBER 2

NAME: _____ DOB: _____

ADDRESS: _____

DAYTIME PHONE #: _____ FAX #: _____

CELL PHONE #: _____ EVENING PHONE #: _____

EMAIL ADDRESS: _____

TOURNAMENT DATE _____ TOURNAMENT LOCATION _____

PLEASE DESCRIBE WHAT HAPPENED: _____

WHERE WERE YOU STATIONED? _____

DID YOU SEE THE BALL GO INTO THE HOLE? _____

WHO REMOVED THE BALL FROM THE HOLE? _____

DID THE PRECEDING GROUP WITNESS THE ACE? _____

WHAT WAS THE YARDAGE ON THE HOLE & WHERE WERE TEE BLOCKS POSITIONED? _____

ARE THERE ANY OTHER COMMENTS YOU WOULD LIKE TO MAKE? _____

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PLAYING PARTNER QUESTIONNAIRE NUMBER 3

NAME: _____ DOB: _____

ADDRESS: _____

DAYTIME PHONE #: _____ FAX #: _____

CELL PHONE #: _____ EVENING PHONE #: _____

EMAIL ADDRESS: _____

TOURNAMENT DATE _____ TOURNAMENT LOCATION _____

PLEASE DESCRIBE WHAT HAPPENED: _____

WHERE WERE YOU STATIONED? _____

DID YOU SEE THE BALL GO INTO THE HOLE? _____

WHO REMOVED THE BALL FROM THE HOLE? _____

DID THE PRECEDING GROUP WITNESS THE ACE? _____

WHAT WAS THE YARDAGE ON THE HOLE & WHERE WERE TEE BLOCKS POSITIONED? _____

ARE THERE ANY OTHER COMMENTS YOU WOULD LIKE TO MAKE? _____

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GOLF PROFESSIONAL QUESTIONNAIRE

NAME: _____ DOB: _____

ADDRESS: _____

DAYTIME PHONE #: _____ FAX #: _____

CELL PHONE #: _____ EVENING PHONE #: _____

EMAIL ADDRESS: _____

TOURNAMENT DATE _____ TOURNAMENT LOCATION _____

PLEASE DESCRIBE WHAT HAPPENED: _____

HOLE NUMBER: _____

WERE YOU STATIONED AT THE HOLE? _____

WHAT WAS THE YARDAGE ON THE HOLE? _____

WHO SET THE YARDAGE MARKERS? _____

DID THE PRECEDING GROUP WITNESS THE ACE? _____

HAS THERE EVER BEEN AN ACE SCORED ON THIS HOLE, IF SO HOW MANY? _____

ARE THERE ANY OTHER COMMENTS YOU WOULD LIKE TO MAKE? _____

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