

# J.M. Johnson

INSURANCE AGENCIES



530 Kenaston Blvd., Winnipeg, MB R3N 1Z4  
 Phone: 204-489-1555 Fax: 204-489-7808  
 Toll Free: 1-800-876-9698

*Office Use Only*

**CONTRACT #** \_\_\_\_\_  
**JMJ CODE:** \_\_\_\_\_

CUSTOMER NAME:	_____
CONTACT PERSON:	_____
ADDRESS:	_____
PHONE:	_____
FAX:	_____
TOURNAMENT:	_____
DATE:	_____
COURSE:	_____
ADDRESS:	_____
# PLAYERS:	Amateurs _____ + Pros _____ = _____

<b>Office Use Only</b>	PREMIUM:	_____
	TEE SIGN:	_____
	ADM. FEE:	_____
	TOTAL FEE:	_____
		Automatic Prize Restoration Included: <input type="checkbox"/> Yes <input type="checkbox"/> No

Hole	Yards	Prize Description
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**DECLARATION**

A have read, and am aware of, the contents of this application form (front & back) which if accepted will be made part of the certificate issued by J.M. Johnson Insurance Agencies Ltd.

**CUSTOMER SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**COVERAGE WILL BE SUBJECT TO THE WARRANTIES AND CONDITIONS FOUND OVERLEAF**

JMJ INTERNAL: \_\_\_\_\_ FAXED TO CO. \_\_\_\_\_ POSTED: \_\_\_\_\_ SIGNAGE REQ'D: \_\_\_\_\_

