Form 4. Registration.

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| Country |  |
| Contact person |  |
| E-mail |  |
| Telephone |  |

**President´s golf.**

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| Last name | First name | HCP |
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**President´s accompanying partners and ladies golf July 30th**

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| Last name | First name | HCP |
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**Please email this form to** LEK@golf.is**before Jun 15th, 2024.**