

SPECTATOR CART APPLICATION

PLEASE PRINT ALL INFORMATION

NAME:	
(First, Middle Initial, Last)	
ADDRESS:	
(Number, Street, Apartmen	nt Number)
DATE OF BIRTH:	TELEPHONE:
ALTERNATE PHONE:	EMAIL ADDRESS:
PLEASE MARK THE BOX BELOW	FOR WHICH YOU ARE APPLYING THE RIGHT TO USE A CAR
NOTE: You must submi	t a copy of your proof of eligibility with this application
1 Department of Motor	Vehicles Disable Person Placard Identification Card
2 Disability insurance av	vard letter
3 V.A. Letter confirming	g a disability of 50% of greater
	**** SPECIAL NOTES ****
www.jgaa.org. A 5-day waiting periodocuments and issue the official card processing, materials and shipping of Violation of any the policies printed of	olf cart must be pre-approved. The request form can be found at d (from the date we receive the materials) is required to verify the and Spectator Cart Badge. There will be a \$15 charge for the badge. Any lost card will have a \$10 replacement fee. On the badge will result in the immediate loss of privilege. The Spectator Cart Badge must be present to have options.
The JGAA reserves the right to make find	Date: all determination of eligibility for Spectator Cart use. It is understood for the sole use of the approved spectator, and no one else. It is not
transferable.	J J III



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Credit Card Authorization

Applicants Name		
Application Fee: \$15		
Credit Card Number (VISA/N	IC only)	
Exp. Date	Security Code (3-digit # on back)	
Name on Card		
Billing Address		
Signature		