



Golf Retirement Plus™ Program

FootJoy U.S.
Attn: Sales Administration Dept
333 Bridge St.
Fairhaven, MA 02719

Option #1

TO BE SIGNED BY BOTH THE FINANCIALLY RESPONSIBLE PARTY AUTHORIZING ANOTHER INDIVIDUAL TO RECEIVE GOLF RETIREMENT PLUS CONTRIBUTIONS AND THE INDIVIDUAL RECEIVING THE CONTRIBUTION

(If independently owned and operated please skip option #1 and proceed to fill out option #2)

I serve in the capacity indicated below for the FootJoy direct account indicated below. The PGA Professional indicated below is an employee of our facility. We have been informed of the Golf Retirement Plus program and the desire of this employee to participate in that program. We want to assist this employee's participation by making available for contribution to the Golf Retirement Plus™ Program, account discounts or incentives offered to us by FootJoy.

In my capacity I have the authority to and do hereby authorize FootJoy to direct any sales program rebates and incentives for which this account would otherwise be eligible, to the Golf Retirement Plus™ Program established by the PGA of America. This authorization shall remain in full force and effect until you are otherwise notified by us in writing. Respectfully,

Financially Responsible Party (Signature) Date

Printed Name

Title

FootJoy Account Name

FootJoy Account Number

I hereby acknowledge that my employer, indicated above, has consented to FootJoy making the above contributions to the Golf Retirement Plus™ Program. I hereby also consent to FootJoy making such contributions.

PGA Ret+ Recipient Date

PGA Member #

Option #2

I hereby state that I am financially responsible for the FootJoy direct account established by the Acushnet Company and request that FootJoy make these contributions to the Golf Retirement Plus™ Program.

Name (Signature) Date

Printed Name

PGA Member #

FootJoy Account Name

FootJoy Account Number

OPTIONAL: DEFERRED PAYMENT DISCOUNT (PARTICIPATION APPLIES TO #1 AND #2 ABOVE)

I would also like to select the deferred payment discount option and authorize FootJoy to direct early payment discounts, which would otherwise be payable to the financially responsible party indicated above, to the appropriate Golf Retirement Plus™ account, in lieu of receiving such early payment discounts. (Please check the box below for participation)

☐ Yes, I would like to participate.