



ANNUAL GOLF TOURNAMENT

Sunday, September 16th

Starts 7:30 AM / Registration \$100 / Scramble Format

Please Fill Out One Form Per Player

Fax to Shirley Witt @ (254) 745-2480

Name: _____

Franchise Concept: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: () _____ Business Fax: () _____

*Cell Phone: () _____ *Email: _____

**Mandatory Information*

Golf Handicap: (Circle One Group) 0-5 11-15 16-20 +21

Teams will be paired on Handicaps, mixtures of concepts, and one vendor per team, if possible,

Entry Fee: \$100.00 Club Rental: \$50.00 Check One: Left handed _____ Right handed _____

Form of Payment: Check _____ Credit Card _____

Mastercard/Visa: _____ Exp. Date: _____

Discover: _____ Exp. Date: _____

Deadline for entry is September 1, 2018 - Please fax to (254) 745-2480

For more information regarding the golf course, visit www.bearcreeel-golf.com

Special Request: _____

Special requests may be submitted, but we can't promise they can be accommodated.

Fax form to Shirley Witt @ (254) 745-2480
Deadline is August 24, 2018