



BOYS & GIRLS CLUB
OF ELMA, MARILLA, & WALES

2017

100 Holes of Golf Registration Form

Please Print Clearly

Name:

Address:

City: _____ State: _____ Zip: _____

Phone: (Home) _____

(Work) _____

(Cell) _____

E-Mail Address:

Team Partner:

In Case of Emergency, Contact:

Emergency Contact Phone number:

Shirt Size: _____

Lodging: The Club will provide lodging for golfers (based on double occupancy with your partner) for both nights. Please indicate dates you plan to stay:

_____ 1 Room for Thursday night, June 1, 2017

_____ 1 Room for Friday night, June 2, 2017

_____ No Room Needed

Golf Pledge (\$1,500 minimum – 100 Holes): \$ _____

Please return completed registration form to tracey.karp-theal@bgcemw.org

Signature: _____

