

# Patriot Day Golf Tournament Entry Form

Please select shotgun preference

FRI. \_\_\_\_\_

SAT. \_\_\_\_\_

MON. \_\_\_\_\_

Golfer #1 \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ HANDICAP \_\_\_\_\_

Address: \_\_\_\_\_ EMAIL: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Golfer #2 \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ HANDICAP \_\_\_\_\_

Address: \_\_\_\_\_ EMAIL: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Golfer #3 \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ HANDICAP \_\_\_\_\_

Address: \_\_\_\_\_ EMAIL: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Golfer #4 \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ HANDICAP \_\_\_\_\_

Address: \_\_\_\_\_ EMAIL: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Entry Fee \$37 Non Military or \$22 Military

TOTAL ENCLOSED \$ \_\_\_\_\_

Mail Entry & Check Payable to Lake Marion Golf Course To:

Lake Marion Golf Course, ATTN: Patriot Day Golf, PO Box 160, Santee, SC 29142