

WCWGA Entry Form

DATE: _____ TEE: _____

STARTING TIME: _____

FOR OFFICE USE ONLY

TOURNAMENT

Location _____ Your Division _____ GHIN# _____

Last Name _____ First _____ Tel. _____

Club _____ Hdep. Index only _____
(Example 20.4)

For Four-Ball Tournaments Only:

Last Name _____ First _____ Tel. _____

Club _____ GHIN# _____ Hdep. Index only _____

Mail entry form, check and a stamped, self-addressed envelope to listed tournament chairperson.

You must be a current member of WCWGA to participate in WCWGA tournaments.