



2018 MEN'S NIGHT REGISTRATION

Name: _____ \$50.00 \$85.00 (Golf Canada Card)

Address _____

Handicap (or average Score) _____ Phone (_____) _____

E-mail: _____

Payment: Visa / M.C. / Amex.

Card #/Exp. _____ / _____

Age Category (please circle): 19-54 55+ (For Golf Canada Card Only)

Player #2

Name: _____ \$50.00 \$85.00 (Golf Canada Card)

Address _____

Handicap (or average Score) _____ Phone (_____) _____

E-mail: _____

Payment: Visa / M.C. / Amex.

Card #/Exp. _____ / _____

Age Category (please circle): 19-54 55+ (For Golf Canada Card Only)

Phone: 306.382.5500 Fax: 306.382.7415 Email: bobbib@moonlakegolf.com

League Agreement

I have read and understand the League Expectations.

Signature on the Men's League Registration form shall constitute compliance with the league expectations. Only one signature is required. **Be sure to inform all team members of this policy**

Agreement dated this _____ day of _____, 20____.

Team Member (Please print) _____

Signature _____