

BUDDA-BOX CANCER BENEFIT
 GOLF OUTING
 SATURDAY, JULY 15, 2017
 9:00 A.M. SHOTGUN START

TEAM CAPTAIN RETURN ADDRESS

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE: _____

TEAM REGISTRATION FORM
 PLEASE RETURN ENTRY FEES TO:
 THAL ACRES LINKS & LANES
 P.O. BOX 308
 WESTFIELD, WISCONSIN 53964
 608-296-2850 www.thalacres.com
 FAX 608-296-4256

ENTRY DEADLINE IS JULY 1, 2017 ** WE ARE ACCEPTING THE FIRST 188 PLAYERS PAID.

BUDDA-BOX GOLF TOURNAMENT REGISTRATION FORM

PLEASE LIST THE PLAYERS BELOW:

	<u>PLAYER'S NAME</u>	<u>PHONE</u>	<u>HDCP</u>	<u>ENTRY FEE</u>
1.	_____	_____	_____	\$ _____
2.	_____	_____	_____	\$ _____
3.	_____	_____	_____	\$ _____
4.	_____	_____	_____	\$ _____
TOTAL ENTRY FEE ENCLOSED:				\$ _____

ENTRY FEES ARE: \$ 65.00 / PLAYER / NON-MEMBER
 \$ 45.00 / PLAYER / THAL ACRES MEMBER

ENTRY DEADLINE IS ***** JULY 1, 2017 ***** RETURN ENTRY FEES & REGISTRATION TO :

THAL ACRES * P.O. BOX 308 * WESTFIELD, WISCONSIN * 53964 * 608-296-2850

YOUR HANDICAP WILL BE THE FOLLOWING IF YOUR AVERAGE SCORE FOR 18 HOLES IS:

SCORE/HDCP	SCORE/HDCP	SCORE/HDCP	SCORE/HDCP	MAXIMUM HDCP
70-76 / 6	85-90 / 16	100-105 / 28	115-120 / 48	MEN – 36
75-80 / 8	90-95 / 20	105-110 / 36	120-125 / 52	WOMEN – 54
80-85 / 12	95-100 / 24	110-115 / 42	125-130 / 54	www.thalacres.com