

**GMWGA Golf Tournament**

**SPONSORING CLUB:**

**Date of the Event:**

**Date Applications are Due to the Club:**

**Application Mailing Date (Set by the GMWGA Representative):**

NAME	Handicap index as of 1 <sup>ST</sup> of month of tournament
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____

**ENTRY FEE: (non-refundable) \$ 5.00**

**Amount Enclosed** \$ \_\_\_\_\_

**Checks made payable to:**

**Mail To:**

**Email: for clubs with no entries please email or call:**