BLACK LAKE GOLF CLUB SPRING SCRAMBLE - REGISTRATION FORM

Saturday, April 27, 2024

Entry Deadline: April 1, 2024

REPRESENTING LOCAL	UNION#	#

SHOTGUN 10:00 A.M.

		SHOTGON TO.00 A.W.		
TEAM CAPTAIN # 1 [please print]				
Address:				
City/State/Zip:				
Phone:		/ • E-mail:		
		HCP or Average 18-hole score:		
TEAM MEMBER # 2				
[please print] Address:				
City/State/Zip:				
Phone:	/ • E-mail:			
	HCP or Average 18-hole score:			
TEAM MEMBER # 0				
TEAM MEMBER # 3 [please print]				
Address:				
City/State/Zip:				
Phone:		• E-mail:		
		HCP or Average 18-hole score:		
TEAM MEMBER#4				
[please print] Address:				
City/State/Zip:				
Phone:		/ • E-mail:		
	HCP or Average 18-hole score:			
		PAYMENT INFORMATION		
Name on Credit Card (plea	ase print):			
Type of Cred	dit Card:	☐ MC ☐VISA ☐AMEX		
Credit	Card #:	Expires:		
Send Registration Form	n and Ent	ry Fee to: For additional information:		
Black L	ake Golf (Club 989-733-GOLF (4653)		

Black Lake Golf Club 2800 Maxon Road Onaway, MI 49765 989-733-GOLF (4653) FAX: 989-733-5314 Web site: <u>www.blacklakegolf.com</u>