



ANNUAL OUTING GOLF REGISTRATION FORM

Member Name: _____

Please check one:

I will play in the members only **18-hole format at 12:30 PM**. My average score is _____ and/or my handicap is _____. My payment of \$50.00 will be made by check payable to SWFEPC and sent to: SWFEPC, Attn: Treasurer, PO Box 2098, Sarasota, FL 34230-2098

I will play in a **9 hole scramble at 12:30 PM**. My payment of \$50.00 will be made by check payable to SWFEPC and sent to: SWFEPC, Attn: Treasurer, PO Box 2098, Sarasota, FL 34230-2098

Please pair me with the following individual(s):*

*If you do not have a foursome you will be assigned to one.

Please return to Tammie Sandoval-Badger NO LATER THAN MAY 1, 2019 by:

Fax: 941-361-2880

E-mail: tammie.sandoval@bmo.com