



JUNIOR TEAM ENTRY

9am Start Time

Player #1 – Name - _____ School - _____

Age (as of 8-11-2017) - _____

Address - _____

City - _____ State - ____ Zip - _____

Parent Name - _____

Parent Phone - _____

Player #2 - Name - _____ School - _____

Age (as of 8-11-2017) - _____

Address - _____

City - _____ State - ____ Zip - _____

Parent Name - _____

Phone - _____

Must be 17 Years of age or younger as of August 11, 2017

ENTRY FORMS MUST BE RETURNED BEFORE AUGUST 4TH at the El Dorado Golf and Country Club