



Official MGA Tournament Hotel Sponsor

MISSOURI GOLF ASSOCIATION
WOMEN
SENIOR SERIES EVENTS
2010 MAIL/FAX TOURNAMENT ENTRY FORM

Missouri Golf Association
PO Box 104164
Jefferson City, MO 65110
573-636-4225 fax number
www.mogolf.org

ENTRY FORM

Table with 5 columns: Date, FLIGHT CHOICE: NET or OPEN, Club, City. Includes a red checkmark icon in the first cell and a green arrow icon in the second cell.

Registration Fee per event below \$70

\$ _____ Total Amount enclosed

Player _____ (Please print)

Address _____

City/State/Zip _____

Date of Birth _____ Age _____ GHIN Number _____

eMail address _____ Phone _____
(eMail used for important tournament information)

All returned checks will be charged a fee of \$25. Cancellations before the close of entries will be refunded less a \$15 fee. Checks, Visa or MasterCard Only

Credit Card # _____ Exp Date _____

Name as it appears on CC _____

City/State/Zip _____