



## Tournament Registration Form

Tournament Name: FATHERS DAY OUTING Date: 06/18/2023

Formant Team (circle one) : 2-Man Scramble 4-Man Scramble Other

Team Name (if required for tournament) : \_\_\_\_\_

Team Captain: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Second Player: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Third Player: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Forth Player: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

To be filled out by Columbia Staff:

Paid in full by: Credit Card \_\_\_\_\_ Check \_\_\_\_\_ Cash \_\_\_\_\_

OR

Paid by player: Captain \_\_\_\_ 2nd Player \_\_\_\_ 3rd Player \_\_\_\_ 4th Player \_\_\_\_

Submitted On: \_\_\_\_\_

Submitted By: \_\_\_\_\_