2024 WEDNESDAY EVENING LADIES LEAGUE REGISTRATION FORM

LEAGUE FORMAT: 3 LADY SCRAMBLE (THREE FLIGHTS DETERMNED WEEKLY)

TEAM	NAME:			
<u>TEAM</u>	MEMBERS	PHONE #	WORK PHONE	HANDICAP/OR 9-HOLE SCORE
PHONE #:		EMAIL:		
I WANT	TO BE ON A TEAM:			
PHONE #:		_ EMAIL:		
TOTAL	ENCLOSED: \$		_ (Venmo: @Kathy-Porte	ll – Please Text/Email Form)
NOTES: 1) Only 1 member of the team needs to submit the form with a check for team (\$120 per team) 2) If you want to be a sub only, please complete "Sub List Only" line (\$10.00 fee) 3) Return registration form & entry fee by April 1 st 4) Practice night is May 1 st , 5:00 p.m. 5) League starts on May 8 th , 5:00 p.m.				

**LATE REGISTRATIONS WILL NOT BE ACCEPTED UNLESS WE ARE CONTACTED PRIOR TO DUE DATE.

ADDITIONAL TEAM MEMBERS MAY NOT BE ADDED AFTER REGISTRATION DEADLINE. PLEASE CONTACT US

WITH ANY QUESTIONS REGARDING THIS MATTER.**

MAIL REGISTRATION FORM & ENTRY FEE (Payable to HCC Ladies Evening League) BY APRIL 1ST TO:
KATHY PORTELL
4051 STATE ROUTE 160
HIGHLAND, IL 62249

CALL OR EMAIL IF YOU HAVE ANY QUESTIONS:

JORDAN KEEVEN <u>jkeeven@djhowardrea.com</u> (618) 806-7698 KATHY PORTELL kikiportell@gmail.com (314) 378-2206