

HSF Golf Tour 2011
Team Registration Form – The “Classic at Las Campanas”
Tuesday, August 23, 2011

Company/Team Name: _____

Address: _____ *Day Phone:* _____

City: _____ *State:* _____ *ZIP:* _____ *E-mail:* _____

Player List:

Player #1: _____ *Handicap:* _____ *Shirt Size:* _____

Company: _____ *Day Phone:* _____

Address: _____ *Fax:* _____

City: _____ *State:* _____ *ZIP:* _____ *E-mail:* _____

Player #2: _____ *Handicap:* _____ *Shirt Size:* _____

Company: _____ *Day Phone:* _____

Address: _____ *Fax:* _____

City: _____ *State:* _____ *ZIP:* _____ *E-mail:* _____

Player #3: _____ *Handicap:* _____ *Shirt Size:* _____

Company: _____ *Day Phone:* _____

Address: _____ *Fax:* _____

City: _____ *State:* _____ *ZIP:* _____ *E-mail:* _____

Player #4: _____ *Handicap:* _____ *Shirt Size:* _____

Company: _____ *Day Phone:* _____

Address: _____ *Fax:* _____

City: _____ *State:* _____ *ZIP:* _____ *E-mail:* _____

Please Fax to Erma Sanchez at 342-3524 .