



16th Annual Al Grenert Memorial Golf Tournament

Player Name _____ Handicap Index Ghin # _____

Address _____

Phone Number (____) _____

Email Address _____

Player Name _____ Handicap Index Ghin # _____

Address _____

Phone Number (____) _____

Email Address _____

Player Name _____ Handicap Index Ghin # _____

Address _____

Phone Number (____) _____

Email Address _____

Player Name _____ Handicap Index Ghin # _____

Address _____

Phone Number (____) _____

Email Address _____

Included with your golf registration is one ticket to the Saturday Evening Dinner. Additional dinner tickets for non-golfers are \$45.00. Please indicate below the number of additional dinner tickets that you will need, and include payment with your registration. Thank you.

Number of extra tickets needed _____ x \$45 each = \$ _____

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Please Note: Saturday October 13th 9 a.m. shotgun

The **Entry Fee** of \$175 per player must either be enclosed with this registration form. *The Entry Fee includes: 18 holes of golf/cart/range balls/Saturday evening buffet dinner / continental breakfast. Also, closest to the pin competitions on all par 3's, long drive, most accurate drive and putting contest.*

For **Practice Round** starting times on Friday, October 12th please ☎ 1-207-594-1431
A fee of \$45 will be charged for all practice rounds.

For **Hotel Reservations** ☎ 1-800-341-1650 2018 rates for hotel rooms **\$106.00**

Please mail your registration form with payment to: *Al Grenert Memorial Golf Tournament*
For Tax Deductions - Tax ID 86-1085438 75 Loon Lane, Hope Maine 04847
www.algrenertmemorialgolf.com