



ROCK CHAPEL Ladies Golf Leagues Registration Form 2017



The ladies golf leagues at Rock Chapel are perfect if you are looking for a regular round of golf with other ladies to enjoy a relaxed, fun game in a non-competitive atmosphere.

Name : _____

Address: _____
STREET CITY POSTAL CODE

e-mail (print clearly) : _____

Phone: _____ Cell: _____

Check one: Joining as a single. Joining with the following ladies:

_____, _____, _____

Please note: Singles, twosomes and threesomes will be paired up to make foursomes but always with other ladies from the group.

<p>Tuesday Morning Ladies Golf <input type="checkbox"/></p> <p>21 weeks from May 9 to Sept 26, 2017 Tee times from 9:00am - 10:20am Cost covers golf course green fees. Cost: \$330 + tax = \$372.90</p>
<p>Tuesday Evening Ladies Golf <input type="checkbox"/></p> <p>19 weeks from May 9 to Sept 12, 2017 Cost covers golf course green fees. Tee times from 5:00pm - 6:30pm every 10 minutes. The earliest tee time I can make is _____. Cost: \$300 + tax = \$339.00</p>

Amount	Office Use
	AM-
	PM-
TOTAL	

Cheque is our preferred method of payment if possible. Thank you so much!

Method of pay: Cheque (payable to: Debit Visa MC Cash
Rock Chapel Golf Centre

Additional Information:

- Drop by the proshop to register. Registration will begin once we open in the spring. If someone else is registering for you then you should pay by cheque. Credit card #'s without card/pin present are not accepted by our processor.
- The cost of the program is significantly discounted from Rock Chapel's regular green fee rates to account for some missed weeks. There are no other credits or rain checks given beyond those already worked into the fees.
- The costs for these programs are non-refundable and cannot be shared.
- I understand and authorize that pictures taken may be used for promotion.
- Important: Remember to call proshop at 905-689-8860 a week before the first day to get your first tee time. Tell staff you are a member of the "Tuesday morning or Tuesday evening ladies golf".

I have read and accept all conditions as described on this form.

Signature: **X** _____ Date _____

Office use only	Registration date: _____	Staff Initials	_____
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