

PLEASE NOTE NEW MAILING ADDRESS

MEMBER-GUEST

Saturday September 18th, 2010

NAME

NAME

NAME

NAME

7:00 AM Shotgun Start-- 2 Man Scramble-- Lunch after the Round

Cost is **\$85** Per Player _____ X **\$85** = \$ _____

Please make check payable to **LMGC** and mail to:

Mike Redmerski 5645 Dunrobin Ave, Lakewood, CA 90713 redmemi@aol.com



_____ Exp Date _____

Mailing Address

Credit Cards will be charged a \$2 per player convenience fee.

CHECK BOX OF YOU ARE INTERESTED IN VOLUNTEERING TO HELP AT THE TOURNAMENT TABLE. FROM _____ to _____



The Wood

LAKEWOOD MEN'S GOLF CLUB

PLEASE NOTE: VISA/ MC OR CHECK NO PAYMENT ACCEPTED AT TABLE. PRE-PAY OR DON'T PLAY