**Official Entry Form 1A/2A North East Zone Golf**

**Grand Centre Golf and Country Club**

- All entries must be **emailed** no later than

**3:30 pm, Monday September 11th, 2017**

**- Contact:** Jason Kozlow

Email: [jkozlow@lcsd150.ab.ca](mailto:jkozlow@lcsd150.ab.ca)

Phone: 780-594-4050

* Name of School**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* Contact: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* Phone # **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Boys Team**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Handicap | Date of Birth | Year Entered Grade 12 | Instructional min/week |
|  |  |  |  |  |
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**Individual Competitor**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

**Girls Team**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Handicap | Date of Birth | Year Entered Grade 12 | Instructional min/week |
|  |  |  |  |  |
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**Individual Competitor**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
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**Tournament Fees**

Payable to NEASAA

Fees must be paid at time of Registration

**$45.00 / Golfer**

includes Green Fees, Buffet Lunch

**$15.00 / Coach Meal**

Number of Golfers = X $45.00 = $

Number of Meal Tickets = X $15.00 = $

Total = $