



2019 MEN'S GOLF LEAGUE – SIGN UP SHEET

TEAM NAME (Mandatory): _____

NAME: _____

ADDRESS: _____

PHONE: (Home) _____ (Work) _____

2018 HANDICAP INDEX: _____

HOME E-MAIL: _____

WORK E-MAIL: _____

PARTNER NAME: _____

ADDRESS: _____

PHONE: (Home) _____ (Work) _____

2018 HANDICAP INDEX: _____

HOME E-MAIL: _____

WORK E-MAIL: _____

ALTERNATES:

_____ 2018 Handicap Index: _____

_____ 2018 Handicap Index: _____

OR...

_____ I would like the Club's assistance to help pair me up with a team.

Question: Did you participate in 2018 CBGC League? Yes / No

<u>Office Use</u>		
Team Registration Fee: \$150 per 2 Person Team (\$75 per Individual)		
Total Amount Paid \$ _____	Manager's Initials: _____	
_____ Cash	_____ Credit Card	Check # _____
Date Paid: _____	Payment Received: via Mail	In Person at Pro Shop

Make Payment and Send Back To:

Chesapeake Bay Golf Club, 128 Karen Drive, Rising Sun, MD 21911
Contact: Andrew Barbin, Jr. 410-658-4343 x3 or email: abarbinjr@chesapeakegolf.com