



# 2008 Tournament Entry Form

## Springbrook Golf Course & Naperbrook Golf Course



2220 W. 83rd Street  
Naperville, IL 60564  
Phone (630)848-5060  
Fax (630)848-5064

### Tournament Schedule (Please check appropriate tournament box)

22204 W. Hassert Blvd.  
Plainfield, IL 60585  
Phone (630)378-4215  
Fax (630)378-9615

April 5	<input type="checkbox"/>	Partner Best Ball Challenge	Women's City Championship	<input type="checkbox"/>	June 23
April 12	<input type="checkbox"/>	Partner Scramble	Men's City Championship	<input type="checkbox"/>	July 26 & 27
May 7	<input type="checkbox"/>	Senior Blind-Draw Scramble	Senior City Championship	<input type="checkbox"/>	September 10 & 11
June 4	<input type="checkbox"/>	Senior Partner Championship	Senior Fall Scramble	<input type="checkbox"/>	October 1
June 7 & 8	<input type="checkbox"/>	Brooks' Team Championship	Fall Scramble	<input type="checkbox"/>	October 11

### Contestant Information

**Player # 1**

(First Name): \_\_\_\_\_ (Last Name): \_\_\_\_\_

Mailing Address: (Street Address): \_\_\_\_\_

(City): \_\_\_\_\_ (State): \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Handicap Home Club: \_\_\_\_\_ (Handicap Index): \_\_\_\_\_

**Player # 2**

(First Name): \_\_\_\_\_ (Last Name): \_\_\_\_\_

Mailing Address: (Street Address): \_\_\_\_\_

(City): \_\_\_\_\_ (State): \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Handicap Home Club: \_\_\_\_\_ (Handicap Index): \_\_\_\_\_

**Player # 3**

(First Name): \_\_\_\_\_ (Last Name): \_\_\_\_\_

Mailing Address: (Street Address): \_\_\_\_\_

(City): \_\_\_\_\_ (State): \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Handicap Home Club: \_\_\_\_\_ (Handicap Index): \_\_\_\_\_

**Player # 4**

(First Name): \_\_\_\_\_ (Last Name): \_\_\_\_\_

Mailing Address: (Street Address): \_\_\_\_\_

(City): \_\_\_\_\_ (State): \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Handicap Home Club: \_\_\_\_\_ (Handicap Index): \_\_\_\_\_

Tee Time Request: \_\_\_\_\_ Pairing Request: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Office Use Only:**

Application # \_\_\_\_\_ Date: \_\_\_\_\_ Cash / Check / Charge \_\_\_\_\_ Employee Initials: \_\_\_\_\_