O \$2400 per foursome / \$600 per participant	
Name #1	
Handicap	
Address	City,State, Zip
Phone	Email
Name #2	
Handicap	
Address	City,State, Zip
Phone	Email
Name #3	
Handicap	
Address	City,State, Zip
Phone	Email
Name #4	
Handicap	
Address	City,State, Zip
Phone	Fmail