

REGISTRATION FORM

SMC Foundation 16th Annual Charity Golf Classic
Four-Person Scramble
Saturday, June 19, 2021
Hazen Golf Course



I am registering for (check one): *Minimum handicap *: 50/team*

myself a couple four-person team

Player Name(s)

1. _____ Individual handicap: _____
2. _____ Individual handicap: _____
3. _____ Individual handicap: _____
4. _____ Individual handicap: _____
- or Team handicap: _____

Contact: _____ Phone: _____

Mailing address: _____

Register early as the tournament fills up fast! We are happy to place you on a team if you sign up as an individual or couple.

Entry Fee: \$50/person or \$200/team

Teams are responsible for bringing, reserving and/or securing their own golf carts for the tournament. Teams are also permitted to walk the course during the tournament if they so choose.

Pre-register by sending this form along with your entry fee to:



Sakakawea Medical Center Foundation
510 8th Ave NE
Hazen, ND 58545

Questions? Contact:

Jayne Fritel at (701) 748-7269 or jfritel@smcnd.org
Carley Haugen at (701) 748-7218 or chaugen@smcnd.org