



2025 League Registration Form – Team or Individual

League Night/ Evening - _____

<p>Golfer 1 Name _____ Email _____ Phone _____ Please check for: 50/50 _____ Mulligans _____ Putting _____ TOTAL:</p>	<p>Golfer 2 Name _____ Email _____ Phone _____ Please check for: 50/50 _____ Mulligans _____ Putting _____ TOTAL:</p>
<p>Golfer 3 Name _____ Email _____ Phone _____ Please check for: 50/50 _____ Mulligans _____ Putting _____ TOTAL: Alternate (if applicable) Name _____ Email _____ Phone _____</p>	<p>Golfer 4 Name _____ Email _____ Phone _____ Please check for: 50/50 _____ Mulligans _____ Putting _____ TOTAL: Alternate (if applicable) Name _____ Email _____ Phone _____</p>

Using Private Cart: _____ If yes, owner name: _____

Dietary Restrictions/ Food Allergies: _____

10% discount if paid and registered prior to February 15th, 2025 (Does not apply to weekly competitions). Discount applied _____ Discount amount _____

TOTAL OWING: _____ Date Paid: _____ TOTAL Paid & Method: _____

Registration forms and Payment can be made via e-transfer to accounts@kingswoodgolf.ca, using **Kingswood** as password. Alternate payments of cash, credit card or cheque, please email accounts@kingswoodgolf.ca