

Golf League Registration 2015

League Day: _____

Name of League: _____

Approx. Start Time: _____ Number of Golfers in League: _____

(Please Note: Lindenwood has the discretion to modify requested start time)

Starting Date: _____ End Date: _____

Accepting New Members: Yes / No (please circle one)

Contact Information

President of League: _____

E-mail: _____

Address: _____

Preferred Daytime Phone #: _____

Alternate Contact Name: _____

Alternate Contact E-mail: _____

Alternate Contact Preferred Daytime Phone #: _____

You can both scan and email to: golfshop@lindenwoodgolf.com

Or fax back to: 724-745-0907

Or mail to: Lindenwood Golf Club,
P.O. Box 1193
McMurray, PA 15317

2015 9 hole rates Monday through Friday: \$16 to walk, \$24 to ride
2015 18 hole rates Monday through Thursday: \$32 to walk, \$48 to ride
To view a tentative league schedule, go to www.lindenwoodgolf.com

Office Use Only

Date Registration was received: _____

Accepted by: _____