

Pacific Toyota



BUSINESS HOUSE TWILIGHT SERIES 2009-2010

TEAM REGISTRATION FORM

Name of Team: _____

Player Details (nominate up to eight, substitutes can be made during the season per the rules):

NAME IN FULL	Affiliated Player HOME CLUB			Affiliated Player HOME CLUB			Current or previous Handicap	Tick here if you have played BHG before	Phone #
	I/D *			I/D *					

*These are for affiliated players only

NOTE:

Fax to: 5785071 - This registration form to be returned to the Tauranga Golf Club as soon as possible to enable us to provide you with your team ID numbers prior to the commencement of Round 1 of the competition.