



2017 OFFICIAL ENTRY FORM

Player's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

I certify that my USGA Index is: _____ and is recorded at _____

I choose to compete in: Championship (Open) Flight: _____ Flight Competition _____

Player's Signature: _____

TOURNAMENT DATES: FRIDAY, SEPTEMBER 15 - SUNDAY, SEPTEMBER 17, 2017

ENTRIES MUST BE ACCOMPANIED BY \$145.00 ENTRY FEE.

ENTRIES CLOSE ON FRIDAY, SEPTEMBER 8, 2017

NO ENTRY FEE REFUNDS AFTER FRIDAY, SEPTEMBER 8, 2017

ELIGIBILITY REQUIREMENT:

PLAYER MUST BE AN AMATEUR GOLFER WITH AN ESTABLISHED HANDICAP OF 12 OR LESS WHO HAS NOT COMPETED IN HIGH SCHOOL OR COLLEGE GOLF TOURNAMENTS DURING THE 24 MONTHS IMMEDIATELY PRECEDING THE 1ST ROUND OF THE McALLEN AMATEUR GOLF CHAMPIONSHIP. MEMBERS OF COLLEGE OR HIGH SCHOOL TEAMS ARE NOT ELIGIBLE

