## Glen Eagle Golf Club TOURNAMENT CONTRACT A TOUCH OF SCOTLAND Name of Tournament: Date of Tournament:

Name of Tournament:		Date of Tournament:	
Tournament Coordinator:_			
Address:			
Phone #:	Fa	Fax#:	
# of Players:	As of:	Type of Start: Shotgun or Tee Time?	
Starting Time:	# of Holes:	\$ Amount per Player:	
\$500 Deposit Sent Date:	Date Received:		
SIGNED:			
Event Chairperson:			
Date:			
Glen Eagle Tournament Co	oordinator:		
Date:			



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