63rd Annual
Faculty & Staff
Golf Tournament

Friday, July 9th, 2021 at CrossWinds Golf Course

REGISTRATION FORM / TOURNAMENT INFORMATION

Participant Fee: $60.00 per participant* (Includes Green Fee, Cart, Continental Breakfast, Lunch, & Door Prizes)

Tournament Format: Four-person scramble with a shotgun start at CrossWinds Golf Course in Bowling Green, KY

Time:
Check-in Time: 7:00 -7:45am
Tee Time: 8:00am
Lunch & Awards: 12:30pm

Prize: First, Second, & Third place awards; Gift certificates and door prizes; Hole-in-one competition; Prizes for longest drive and closest to the plain; Gift bags for each player.

Eligibility: All full-time, part-time, and retired faculty and staff members Western Kentucky University and their family members are eligible to participate in this tournament.

Types of Payment: Cash, Credit Card, or Check (Make checks payable to WKU)

Submission Guidelines: Forms can be submitted by hand, by fax to 270-745-2006, by email to: steve.rey@wku.edu or by mail to the Department of Campus Recreation & Wellness in the Preston Health and Activities Center:

Attn: Steve Rey
Western Kentucky University
Preston Center 54G
1906 College Heights Blvd. #11097
Bowling Green,KY

Submission Deadline: **Tuesday, July 6th, 2021** at the Raymond B. Preston Health and Activities Center

For more information, please call Steve Rey @ 270-745-6060, email steve.rey@wku.edu, or visit our website at wku.edu/imrec/golf/tournament.php

Contact Information

Name: _____   Dept: _____

E-mail: _____   Work Phone: _____

Home Phone: _____

Address: _____

Foursome Information

You do not have to have a team! We will place all Threesomes, Twosomes, and Singles on a team!

1) Name: _____

   E-mail: _____

2) Name: _____

   E-mail: _____

3) Name: _____

   E-mail: _____

4) Name: _____

   E-mail: _____

Office Use Only:
Type of Payment:

_____

_____

_____

_____

Payment Information

(Please Check One):

_____Cash   _____Credit (Complete section below)   _____Check (Make checks payable to WKU)

Card Type (Check One):   ☐ Discover   ☐ Master Card   ☐ Visa

Cardholder's Name: _____   **Expiration Date:** _____

Account Number: _____   **Card Security Code:** _____