

SENIOR OPEN TOUR

www.SeniorOpenTour.com

Presented By:

One of the presented By:

One of the presented By:

Format: Individual Stroke Play

Player Entry Deadline - Nov. 12th

Check-in 10:30 am, Tee-Times 11:30am

www.SeniorOpen.DClgolf.com

Senior Open at the C	ountry Club of Ocala Y FORM	Tournament: Saturday November 16, 2019
Player Name:		Age:
Address:	City:	State: Zip:
Phone:	Fax:	Cell:
	ke e-mail address legible)	Amateur Hndcp ID#:
Handicap Service (GHIN, GLMS etc)	: Curren	t Estab. Handicap Index:
Club/Organization Issuing Handicap:	———Verifica	ation Ph #:
	evenience fee will be added to a	Il credit card transactions
Card #:		
Name on Card:	Signature:	
Tournament Schedule	Prizes and Awards*	Tournament Format
Nov. 12 - 15: Practice Round Nov. 16th: Tournament Includes: (1) Round of Golf Range balls/Cart Cash for Pros Cash or MC Gift Cards for Amateurs	A & B Flight: *Cash or MC Voucher C Flight: *Cash or MC Voucher All taxes, expenses & other costs are participant's responsibility	 Pros - 50 - 64: Green Tees 6,435 yards Pros - 65+: Blended Teess 6,366 yards Champ. 0 - 3.9 - Blended Tees 6,366 yds A Flight: 4 - 7.9 - White Tees 6,057 yds B Flight: 8 - 11.9- White Tees 6,057 yds C Flight: 12 -15.9 - White Tees 6,057 yds
	f MC Gift Cards based on number ber \$80.00 Non-Member \$90	
Registration Deadline	e: Nov 12, 2019 Late Entry	
Procedures, as listed on the Senior Open Taccept personal and sole responsibility for release, All Sponsors, the hosting golf club(s staff and employees from any and all liability my entry or participation in any Senior Oper the Official Rules and hereby declare that I in Senior Open Tour. I understand that my Entry	Four website. I agree that there are all such risks, including but not limes), DCI Golf/DeSilva Communication of for any event or consequence who Tour event. I have examined the Fineet the entry requirements and agree and Authorization may be accepted.	or Open Tour Rules/Regulations and Polices & e certain risks inherent in the game of golf and lited to any health-related risks, and do hereby its, Inc. and its officers, directors, members of its latsoever in any way arising out of or relating to Registration Form, Policies, Player Conduct and ree to abide by the Rules and Regulations of the d and binding via Phone, E-mail or U.S. Mail and e. See complete Rules & Regulations/Policies

I wish to compete in the: __ Professional Div. for Cash __ Indexed Div. for Cash __ Indexed Div.for Prize Vouchers

Player Signature Date
Your Entry Reservation will be asknowleged and confirmed via e-mail, upon receipt.

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Please Make Checks Payable to: DCI Golf

Scan & e-mail to paul@dcigolf.com or Fax Entry Form to: (386) 742-1938 or Mail to:
DCI Golf 16150 Aviation Loop Drive, P.O. Box 15428 Brooksville, FL 34604
Phone: (386) 742-6907 Fax: (386) 742-1938 E-mail: paul@DCIGolf.com

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