

Warrenton Golf Course
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MEN'S MONDAY NIGHT GOLF LEAGUE 2020

- League:** Find a partner and sign up to play weekly in an organized 2-Person team Individual Stroke Play Golf League. Limited to the first Paid 24 Teams. This league is designed for beginners and experienced golfers wanting to play fun golf. Players should be able to play in 2 hours. Please plan on playing each week. If you cannot play, please plan to have a substitute fill your spot. It is your responsibility to find a sub. If a team does not have 2 players on league night there is a \$8.50 blind fee due the course per player.
- Dates:** The League starts Monday, May 4th, and plays every Monday, except holidays, through September 21st. Players will shotgun start every week at 5:00pm. On Memorial Day and Labor day the Monday league will play on that Thursday.
- Cost:** The cost to join the league is \$50.00 per person. This money goes toward your prize fund which is paid out to players based on their point standings at end of season and handicap services. The Weekly 9 hole Greens Fee/cart is \$14.00 per person.
- Pay up:
Front** Players are encouraged to pay their league Green Fees and Cart Fees up front to save money and speed up the league check in on the night of play. You save \$1.00 per round by doing this. The Price would be \$13.00 x 20 weeks = \$260. Last week is Fun Night, Green Fees/cart/prize money paid separate that night of \$20.00
- Beer &
Brats:** Warrenton will provide Beer and Brats to all league members on the last night of play of the season. We will be playing a 4person scramble with Warrenton assigning the teams. We thank everyone for playing in our leagues and for their support.

Men's Monday Night Golf League 2020

#1: First Name: _____ **Last Name:** _____
Home Phone: _____ **Cell Phone:** _____
Work Phone: _____ **Email Address:** _____
Address: _____ **City:** _____ **Zip:** _____
Date Paid: _____ **Payment Amount:** _____ **Employee Initial:** _____

#2: First Name: _____ **Last Name:** _____
Home Phone: _____ **Cell Phone:** _____
Work Phone: _____ **Email Address:** _____
Address: _____ **City:** _____ **Zip:** _____
Date Paid: _____ **Payment Amount:** _____ **Employee Initial:** _____

****Registration form must be completed and turned in with \$50.00 per person to be registered for the league.**