



**Lakeside Golf Club
2017
Monday Night Men's League**

Team Sign up Form

TEAM NAME: _____

CAPTAIN

Name: _____
Last First M.I.

Phone: _____

Email: _____

GHIN#: _____

Player 2

Name: _____
Last First M.I.

GHIN#: _____

Player 3

Name: _____
Last First M.I.

GHIN#: _____

Player 4

Name: _____
Last First M.I.

GHIN#: _____

Player 5

Name: _____
Last First M.I.

GHIN#: _____

Player 6

Name: _____
Last First M.I.

GHIN#: _____

The Captain will be point of contact for all league information. He will receive all pertinent information to be distributed to players on the team.