



Sunday, September 16th
Hidden Haven Golf Club
Cedar, MN

Shawn DeLong Memorial GOLF TOURNAMENT

Golf Registration Form

Name: _____

Address: _____

Phone Number: _____

Email: _____

Player 1: _____

Player 2: _____

Player 3: _____

Player 4: _____

___ Individual (\$80)

___ Team of 4 (\$320)

Dinner Only Registration

Non-Golfer Dinner only: Adults _____ x \$15 = \$_____

 Children _____ x \$10 = \$_____

Please return form by September 9th

Make checks payable to Trinity Lutheran Church and School

Contact Vincent Grochow @ 701-388-1975 or vingrochow@gmail.com with any questions