



40th Annual Senior Men's Invitational
ENTRY FORM
Monday, September 9th, 2019

Please return form either by:

Email: admin@kingsvillegolf.com

Mail: Kingsville Golf and Country Club
640 County Road 20
Kingsville, ON N9Y 2E6

Phone: 519-733-6561 ext. 110

Name: _____

Street: _____

City/Town: _____

Postal Code: _____

Phone No.: _____

Handicap Factor: _____ Age as of Sept 9, 2019 _____

Club Name: _____

Email Address: _____

Signed: _____

Billing Options:

☐ Cheque enclosed in the amount of \$145 (non-members) or \$100 (members) payable to Kingsville Golf and Country Club

☐ Bill to my account _____ (Account Number)

☐ Credit Card* No. _____ Expiry _____

***You may call and provide your credit card number to Jacqui at 519-733-6561 ext 110
Monday through Friday, 8:30 am to 5:00 pm**