CAPITAL DISTRICT SCHOLARSHIP GOLF TOURNAMENT

WEDNESDAY, SEPTEMBER 4, 2019
COBBLESTONE PARK GOLF CLUB
1298 UNIVERSITY PARKWAY, BLYTHEWOOD, SC 29016

12:00 PM – Check-In/Lunch
1:00 PM – Shotgun Start
6:00 PM – Awards & Meal

Tournament Contact
Philipp Dieckmann
AECOM
(803) 254-4400 philipp.dieckmann@aecom.com

Format
Four-person team – Captain’s Choice

Dress Code
Collared Shirt Required. No Jeans.
Soft Spikes Only. No Coolers.

Awards
Awards will be given to all members of the first and second place teams. Special awards will also be given (such as longest drive and closest to the pin).

Mulligans
Mulligans are available for purchase at $5 each (maximum two per player). Advanced purchase is preferred. Mulligans will be used for door prizes.

Registration
The cost is $80 per player. Registration includes green fees, golf cart fees, range balls, beverages, lunch, a post-tournament meal, and door prizes.

Entry Deadline
All entries must be postmarked by August 9, 2019.

CHECK PAYMENTS (Mail Form & Check)
WEASC-Capital District
Attn: Donna West
JMWSC, PO Box 2555, Lexington, SC 29071
(803) 785-3232 dwest@lcjmWSC.com

CREDIT CARD PAYMENTS (Mail or Fax Form)
WEASC, Attn: Michele Splawn
2019 Capital District Golf Sponsorship
121 Executive Center Dr, Ste. 115
Columbia, SC 29210
Fax: (803) 358-0646

Capital District Scholarship Golf Tournament Registration Form

Individual - $80 4-Person Team - $320 Mulligans - $5 (limit 2 per player)
(Foursome Not Required - Individuals Will Be Paired)

Name ____________________________ Phone ______________ No. Mulligans ______
Company ____________________________ *Email ____________________________

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Company ____________________________ *Email ____________________________

Name ____________________________ Phone ______________ No. Mulligans ______
Company ____________________________ *Email ____________________________

Name ____________________________ Phone ______________ No. Mulligans ______
Company ____________________________ *Email ____________________________

*Must have at least one email per team. Registration confirmations and tournament instructions will be sent by email.

All proceeds from the tournament will benefit the WEASC Capital District Scholarship Fund.

☐ MC ☐ V ☐ AX ☐ D
CC#: ____________________________ Exp Date: ____________ CVV Code: ____________
Billing Address: ____________________________ Street ____________________________
__________________________ City ____________________________ St ____________________________ Zip: ____________
SIGNATURE: ____________________________ AMOUNT: $__________