



**Bloomington-Normal Golf Association
Parent-Child Tournament
August 12-13, 2017
Weibring Golf Club – Ages 13 and Older**



Format:

- Two-person stroke play alternate shot format. Flighted after 18 holes.
- Tee Times:
 - There will be three teams per tee time.
 - Select your own tee time (between 9am-11am) for Saturday when paying your registration fee
 - Sunday tee times will be assigned (beginning at 9am) based upon Saturday scores and will posted at WGC, at www.isugolf.com, www.bnga.org, emailed to competitors, and in the Pantagraph.
- Flights will be based on number of entries. Each flight contains approximately 10 teams.
- Parents can sign up with only one child.
- Tees: Males: White tees Females: Red tees
- Note: Whiffs will be counted and the player whiffing must try again until contact with the ball is made.

Entry Fee:

- **\$70 per team.** Includes greens fees, access to the exclusive Mounier Golf Training Center, and trophy fund.
- **\$25 per team** Weibring Golf Club Season Pass Holder
- **\$28 per team/day** optional cart rental. Carts are recommended.
- Qualifying tee times will be assigned with paid registration only.
- **Deadline:** 5pm Friday, August 11

Eligibility

- Parents must meet at least one of the following BNGA requirements and the Child must be 13 years old or older by the first day of the tournament.
- The "Parent" must have or had legal guardianship of the Child.
- The BNGA recommends both Parent and Child are familiar with the game of golf including its rules and etiquette. All strokes, including whiffs (see above) need to be counted. We do encourage all levels of play.
- The Committee reserves the right to confirm eligibility. 'X' **all** that apply and complete corresponding section.

-
- _____ Be a full time resident of Bloomington-Normal.
 - _____ Be a full time employee of a Bloomington-Normal firm. Firm: _____
 - _____ Be a member or season ticket/card holders at a B-N golf course Course: _____
 - _____ Retired (20+ years of service) employees of a Bloomington-Normal firm 55+ yrs old Firm: _____

Parent Name: _____ Home Phone: _____

Child Name: _____ Date of Birth: ____/____/____

Relationship: _____

Street: _____

City: _____

State/Zip: _____

Email: _____

Do you plan on getting a riding cart? Yes No

(Office Only)

Receipt # _____ Tee Time _____ Staff _____ Date _____ GG _____