

Spring Intramural Golf League Membership Form

Please complete this form and make checks payable to Heather Downs CC.

Name: _____ Birthdate: __/__/__

Address: _____

Phone#: _____

School: _____

Email: _____

Parents Name: _____

Emergency#: _____

Please send entries along with \$75 fees to:

Heather Downs CC
3910 Heatherdowns Blvd.
Toledo, Ohio 43614