

* Special Event / Tournament Booking Sheet *

Fax Form To :

250-832-7341

Email golf@clubshuswap.com

CONTACT NAME: _____ EVENT DATE: _____

ORGANIZATION: _____ PHONE # : _____

MAILING ADDRESS: _____

EMAIL: _____

9 Holes (\$16) 18 Holes (\$30) 27 Holes(\$41) 18 Hole Putting

Receive 10% of Green fees when event exceeds 16 people

TEE TIME: _____ # OF ADULTS _____ # OF JUNIORS _____

SHOTGUN? _____ KP'S ? _____ LD'S _____

NOTES: _____

BBQ ? _____ MEAL TIME : _____ #Hotdog _____ #Hamburger _____

STEAK: _____ # CHICKEN _____ #VEGGIE PLATES : _____ #KIDS MEAL _____

ADD GRATUITY 10% __ 20% __ 30% __ OTHER _____

NOTES: _____

ORGANIZATION WILL PAY FOR: _____

INDIVIDUALS WILL PAY FOR : _____

PAYMENT BY : CHEQUE _____ DEBIT _____ CC _____

FINAL CONFIRMATION ON : _____

SPECIAL NOTES: _____

*LIQUOR CONTROL BOARD REGULATIONS AND LISCENSING REQUIRE THAT ALL LIQUOR BE PURCHASED FROM
THE LOUNGE OR THE CONSESSION CART.*