

# MARYLAND MILLION<sup>®</sup> GOLF TOURNAMENT

## PLAYER REGISTRATION

**PLEASE RETURN REGISTRATION FORMS ASAP**

**TEAM** \_\_\_\_\_

Name of player: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ Handicap: \_\_\_\_\_

### **ADDITIONAL PLAYERS** (if bringing a team):

Name of player 2: \_\_\_\_\_ Phone: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ Handicap: \_\_\_\_\_

Name of player 3: \_\_\_\_\_ Phone: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ Handicap: \_\_\_\_\_

Name of player 4: \_\_\_\_\_ Phone: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ Handicap: \_\_\_\_\_

### **PAYMENT INFORMATION:**

**\$200 for individual player OR \$800 for a team of four**

**Putting contest (50-50): 3 for \$10; 5 for \$15**

**Need some extra help? Purchase a mulligan!**

**Mulligans: \$20 per individual or \$70 per team (limit four per team)**

Check enclosed for \$\_\_\_\_\_ (checks payable to Maryland Million Ltd.)

OR Please charge my (circle one) VISA / MasterCard / Discover

Account Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ 3-digit security code \_\_\_\_\_

Print name on card: \_\_\_\_\_

Signature: \_\_\_\_\_

**Return form and payment to Katy Voss, Chanceland Farm, 1975 McKendree Rd.,  
West Friendship, MD 21794-9747, fax 410-442-9919, or [chanceland@aol.com](mailto:chanceland@aol.com)**