

ENTRY FEE
\$105.00

**2017 S.P. JERMAIN MEMORIAL AMATEUR
MATCH PLAY CHAMPIONSHIP**

Entries Close
July 1, 2017
or when the
field is full.

Ottawa Park Golf Course

July 8, 9, 14, 15, 16

All entries subject to Tournament Committee Acceptance

NAME _____ APPROX. HCP. _____ AGE _____

ADDRESS _____ PHONE _____
(Street) (City) (State) (Zip)

I Request a Power Cart: Yes ___ No ___ EMAIL _____

Entry Limit: 160 players
No telephone entries will be accepted.
No refunds after closing date of July 1, 2017.
Tournament Coordinator: Jim O'Neal (419-350-2421)
or onegolf1@cs.com for email messages (preferred).

All entries *must* be
mailed and will not be
accepted at
Ottawa Park unless ap-
proved by committee
MAIL EARLY!!!

Mail and make checks payable to:

Toledo Metro Golf Association
P.O. Box 140126
Toledo, OH 43614-0803

Entries Close
August 5, 2017
or when the
field is full.

**2017 46th ANNUAL
TOLEDO AMATEUR GOLF CHAMPIONSHIP**
Presented by Jed's Fireballs & Brew
Detwiler Golf Course
Friday - Sunday, August 11 - 13, 2017

Entry Fee \$105.00 (72 holes max)
___ Men's Division
___ Men's & Senior Division

Entry Fee \$80.00 (54 holes max)
___ Senior Division Only

NAME _____ AGE (as of 8/11) _____ NOTES _____

ADDRESS _____ PHONE _____
(Street) (City) (State) (Zip)

I Request a Power Cart: Yes ___ No ___ EMAIL _____ APPROX. HDCP. _____

Entry Limit: 104 players
Senior Division Eligibility: Age 50 or older
No refunds after closing date of August 5, 2017.
Tournament Coordinator: Jim O'Neal (419-350-2421)
or onegolf1@cs.com for email messages (preferred).

All entries *must* be
mailed and will not be
accepted at
Detwiler unless ap-
proved by committee.
MAIL EARLY!!!

Mail and make checks payable to:

Toledo Metro Golf Association
P.O. Box 140126
Toledo, OH 43614-0803

ENTRY FEE
\$100.00
(Includes green fees
and field skins)

2017 9th Annual TOM WOLF MEMORIAL CLASSIC
Monroe Country Club (Sat) & South Toledo GC (Sun)
Saturday, September 9 and Sunday, September 10, 2017
All entries subject to Tournament Committee Acceptance

Entries Close
September 2, 2017
or when the
field is full.

NAME _____ AGE _____ USGA Hcp Index _____

ADDRESS _____
(Street) (City) (State) (Zip)

I Will Compete (check only one): ___ Scratch Division ___ Handicap Division ___ Both Divisions (add \$10.00 to fee)
___ No Field Skins (deduct \$10 from fee)

I Request a Power Cart: ___ Sept. 9 ___ Sept. 10 EMAIL _____ PHONE _____

Entry Limit: 96 players
No telephone entries will be accepted.
No refunds after closing date of September 2, 2017.
Tournament Coordinator: Jim O'Neal (419-350-2421)
or onegolf1@cs.com for email messages (preferred).

All entries *must* be
mailed and will not be
accepted at
S. Toledo unless ap-
proved by committee.

Mail and make checks payable to:

Toledo Metro Golf Association
P.O. Box 140126
Toledo, OH 43614-0803