2024 MEADOWWOOD GOLF COURSE TOURNAMENT RESERVATION CONTRACT

Name of Group: Tournament Date:		Tournament Date:
Starting Time:	Number of Players:	Format:
Organizer's Name:	Home Phone:	Work:
Address:	City:	State:Zip:
he undersigned Tournament Org	ganizer understands and agrees that:	
the specified number of p 2. 100 percent of the green closed by our staff. 3. The tournament will abid 4. The Professional will mak Callaway Scoring System is 5. ALL SHOTGUN STARTS Mill person (Mon-Tue) or \$70 6. Tournament Organizer with the start of the tourname 7. Due to Washington State course. We provide adect 8. Playing time for all tourname 9. MeadowWood Golf Cour with no refunds. (Please 10. This is the entire agreement	players indicated. "No-Shows" are not ou fees must be paid before the tournament e by all the rules of the golf course, include a vailable a Starter, Score Sheets, Closes is also available. UST USE GOLF CARTS and are required to .00 (Wed-Sun). (Please Initial) ill provide a complete list of pairings & start. Liquor and Cannabis Board laws, all beyonate refreshments at fair and reasonab aments will be 4-1/2 hours or less. The reserves the right to discontinue plays.	Int starts with refunds given only if the course is reding all liquor policies. In the starts with refunds given only if the course is reding all liquor policies. In the start and Long-Drive markers. In the start and Long-Drive markers and Long-Drive markers. In the start and Long-Drive markers. In the sta
	ENT AND UNDERSTANDING.	RE 100 SIGN. 100K SIGNITORE
Return the original	By: (Tournament Organize Date: with your deposit as soon as possible to	er)
	For Pro Shop Use Only	
Organization:	For Pro Shop Use Only Adhered to Cont	tract Terms: