

Golf Outing Application



Select your Course: (check one)

Dunwoodie	Hudson Hills	Maple Moor	Mohansic	Saxon Woods	Sprain Lake
PARK PASS HOLDER (FIR	ST & LAST NAME)		PARK PASS NUMBER		
GROUP NAME			E-MAIL ADDRESS		
ADDRESS				1	
CITY			STATE	ZIP	
DATE OF EVENT			AREA CODE & PHONE N	JUMBER (Required)	
START TIME	NO. OF GOLFERS NO. OF CARTS		Reservation Fee (Non Refundable)	\$200	
			Outing Fees:	\$	
			TOTAL:	\$	
will result. No food or beverage Proper golf attire me No rain dates. If ma The \$5 per player fe If special scoring, cle	es may be brought onto the pust be worn at all times. nagement closes the course te for the golf professional is	oremises. Arrangements e, alternative arrangemen e to be paid under a sepa are needed, please conta	rate check. act the golf pro at least two wee	e through the concessi	
Signature of Permit Holder			Signature of Manager		
	WESTC	HESTER COUNT	Y • OFFICE USE ON	LY	
INITIAL PAYMENT \$200 non-refundable reservation fee			SECOND PAYMENT: Fourteen days prior to outing, 50% of final payment is due. Final payment is due on the day of the event.		
Amount: \$ Date: Check No:			Amount: \$ Dat	e: Che	eck No:
Credit Card Amount			Credit Card Amount	_	_
· ·	☐ Visa ☐ American	·	Type: Mastercard V	isa American Ex	xp. Discover
Account No.	E	xp. Date	Account No.	Ехр	o. Date
Golf Professional			\$ TOTAL AMOUNT		