

Rossmere Senior Men's Open Registration

Please complete information for all players in your foursome and email to proshop@rossmere.ca

Player 1 Name: _____ Age: _____

Phone: _____ Email: _____

Credit Card #: _____ Expiry: _____

Player 2 Name: _____ Age: _____

Phone: _____ Email: _____

Credit Card #: _____ Expiry: _____

Player 3 Name: _____ Age: _____

Phone: _____ Email: _____

Credit Card #: _____ Expiry: _____

Player 4 Name: _____ Age: _____

Phone: _____ Email: _____

Credit Card #: _____ Expiry: _____