

# Co-Ed League Member

## 2024 Tuesday Co-Ed League



Get out and enjoy the fresh air and golf on a beautifully manicured course. Gather a group or join alone and meet new golfers.

**Steve Anderson, Golf Programs Manager**

**E-mail:** [steve.anderson@cityofroseville.com](mailto:steve.anderson@cityofroseville.com) **Phone:** 651-792-7154

**Days and Times:** Tuesday 5p– 6:30pm

**League Season:** Weeks of 4/23- 8/20

**League Registration Fee:** \$309.60, 18 weeks

Total includes green fees, registration and taxes.

If using a check, please make payable to: Roseville Cedarholm GC

**League Socials:** Reception in the Clubhouse: August 20



### 2024 Co-Ed GOLF LEAGUE

\_\_ 1 golfer Tuesday Co-Ed = \$309.60 fee

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/St/Zip \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Teammates: 1: \_\_\_\_\_ 2: \_\_\_\_\_ 3: \_\_\_\_\_

Day & Tee Time Preference (circle): Tuesday \_\_\_\_\_ :

Notes: \_\_\_\_\_

**PAYMENT METHOD**

Circle one: Check, Cash, or VISA / MasterCard:

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. \_\_\_\_ / \_\_\_\_

CVV/CVC (on back): \_\_\_\_\_ CC Signature: \_\_\_\_\_

Liability Waiver: I understand that participation in this activity is completely voluntary. I recognize that there are risks in my participation in this activity. I agree to accept those risks. I also agree, in consideration for my being allowed to participate in this activity, and on behalf of myself, my heir, executors, administrators and assigns, to release and discharge the City of Roseville, sponsor(s) of the event or activity, and their officers, employees, agents, successors and/or assigns from liability for any and all injury, damage or loss that is or may arise from my participation in this activity.

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

