

Mark Morris High School Foundation Annual Golf Tournament **Registration Form**

Please include all information for each golfer due to COVID protocols.		
GOLFER #1		
Name:		
Cell Phone:		
E-Mail:		
GOLFER #2		
Name:		
Cell Phone:		
E-Mail:		
GOLFER #3		
Name:		
Cell Phone:		
E-Mail:		
GOLFER #4		
Name:		
Cell Phone:		
E-Mail:		
FOR OFFICE USE ONLY		
Payment Received:		
Team #:	Starting Hole:	