ENTRY FORM

32nd Giddings Cup April 3-6, 2014

PRINT ALL INFORMATION Entry Deadline ~ March 15, 2014

One Entry Form Per Player.

EACH contestant must complete an Entry Form, regardless of who sends the check(s).

This two page Entry Form must accompany each Entry Fee Check: \$490.

Mail to: Landmark / Giddings Cup 74-947 Highway 111, Suite 200 Indian Wells, CA 92210

NAME:(PRINT, as you want it to appear on the Pairings Sheet and Mailing List)	
Mailing Address:	
Telephones: Home ()	Office/Cell ()
Fax: () E-mail:	Print clearly, please
Would you like to receive Entry Conf	
Your ֍նddings Cup history: Have you played in the ֍նddings Cup?	No
Your Partner for 2014	
Partner's NAME:	
Has your Partner played in the &iல்ள்	gs Cup? Yes No Not Sure

ALL teams must declare the Flight they wish to compete in prior to March 28, 2014. Please circle the Flight you and your partner wish to compete in during the 2014 Giddings Cup. Age restrictions do apply: Giddings Cup (55+) Super Seniors (65+) Landmark (25+) The Gibbings Cup Reception will be FRIDAY Night (April 4, 2014) at SilverRock Resort in La Quinta, CA. Please RSVP below: Will you attend the FRIDAY Night Reception? Yes or No Yes or No Will your Spouse/Guest attend with you? Your Spouse or Guest's Name: _____ Yes or No Will you attend the Sunday Awards Luncheon? Your Primary Golf Club: _____ Club's City and State: USGA Index: _____ Shirt Size: Have you ever qualified for a USGA Championship? Yes or No If you wish, please list major USGA event(s) and year(s). If you wish, please say something of interest about your team such as you have been playing golf together since school; you were on the same golf

team; you are related; how many tournaments you play together a year, etc.

Your Signature_____

For further information, please call: Landmark Golf 760-776-6688 or email joeg@landmarkgolf.com. Please visit www.landmarkgolf.com/giddings-cup