



## Golf (Level 2) Unified Alternate Shot Team Registration

- Each team will consist of one athlete and one partner
- Each team is required to provide scores from their previous 8 rounds of golf
  - Qualifying scores should include your team score for 9 holes and the par for the course that you played (ex...27 or 36)
- Please make sure the form is filled out completely. DOB and Gender are required
- Please indicate athlete first and then partner below them

| ATHLETE/PARTNER INFORMATION |            | DOB      | GENDER | ROUND 1      |     | ROUND 2   |     | ROUND 3   |     | ROUND 4   |     | ROUND 5   |     | ROUND 6   |     | ROUND 7   |     | ROUND 8   |     |
|-----------------------------|------------|----------|--------|--------------|-----|-----------|-----|-----------|-----|-----------|-----|-----------|-----|-----------|-----|-----------|-----|-----------|-----|
|                             |            |          |        | (9 HOLES)    |     | (9 HOLES) |     | (9 HOLES) |     | (9 HOLES) |     | (9 HOLES) |     | (9 HOLES) |     | (9 HOLES) |     | (9 HOLES) |     |
| LAST NAME                   | FIRST NAME | MM/DD/YY | M OR F | SCORE        | par | SCORE     | par | SCORE     | par | SCORE     | par | SCORE     | par | SCORE     | par | SCORE     | par | SCORE     | par |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
| COACHES INFORMATION         |            | DOB      | GENDER | PHONE        |     |           |     | EMAIL     |     |           |     |           |     |           |     |           |     |           |     |
| LAST NAME                   | FIRST NAME | MM/DD/YY | M OR F | XXX-XXX-XXXX |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |
|                             |            |          |        |              |     |           |     |           |     |           |     |           |     |           |     |           |     |           |     |



## Golf (Level 5) 18-Hole Individual Stroke Play Registration

- Each athlete must be capable of playing independently
- Each athlete must be able to walk the entire 18-hole round
- Each athlete is required to provide scores from their previous 8 rounds of golf
  - Qualifying scores should include your team score for 18 holes and the par for the course that you played (ex....71 or 72)
- Please make sure the form is filled out completely (DOB and Gender are required)

| ATHLETE INFORMATION |            | DOB        | GENDER | ROUND 1      |     | ROUND 2  |     | ROUND 3  |     | ROUND 4  |     | ROUND 5  |     | ROUND 6  |     | ROUND 7  |     | ROUND 8  |     |
|---------------------|------------|------------|--------|--------------|-----|----------|-----|----------|-----|----------|-----|----------|-----|----------|-----|----------|-----|----------|-----|
|                     |            |            |        | 18 HOLES     |     | 18 HOLES |     | 18 HOLES |     | 18 HOLES |     | 18 HOLES |     | 18 HOLES |     | 18 HOLES |     | 18 HOLES |     |
| LAST NAME           | FIRST NAME | MM/DD/YY   | M OR F | SCORE        | par | SCORE    | par | SCORE    | par | SCORE    | par | SCORE    | par | SCORE    | par | SCORE    | par | SCORE    | par |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
| COACHES INFORMATION |            | DOB        | GENDER | PHONE        |     |          |     | EMAIL    |     |          |     |          |     |          |     |          |     |          |     |
| LAST NAME           | FIRST NAME | MM/DD/YYYY | M OR F | XXX-XXX-XXXX |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |
|                     |            |            |        |              |     |          |     |          |     |          |     |          |     |          |     |          |     |          |     |

