

REGISTRATION FORM

BOSTON CARMEN'S UNION ANNUAL GOLF TOURNAMENT
FRIDAY SEPTEMBER 10, 2021

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

FOURSOME: Name, Address and Email

JACKET SIZE

GOLFER #1: NAME _____

ADDRESS _____

EMAIL _____

GOLFER #2: NAME _____

ADDRESS _____

EMAIL _____

GOLFER #3: NAME _____

ADDRESS _____

EMAIL _____

GOLFER #4: NAME _____

ADDRESS _____

EMAIL _____

ALL CHECKS MUST BE MADE PAYABLE TO:

CARMEN'S UNION COPE GOLF TOURNAMENT

MAIL REGISTRATION FORM AND CHECK TO:

**BILL BERARDINO
VICE PRESIDENT
BOSTON CARMEN'S UNION
295 DEVONSHIRE STREET, 5TH FLOOR
BOSTON, MA 02110**

**Application must be completely filled out
Please print legibly**