



51st Annual Father/Son Championship
June 5th & 6th, 2010

- Start Time:** Tee Times begin both days at 6:30 a.m. Special requests will be allowed only for medical reasons or those with airline flight schedules to meet. You must provide documentation to the AGA before the entry deadline (ie: airline confirmation or doctor's certificate)
- Format :** 2-Man Teams: Modified Chapman at Gross (alternate shot with selected drives.)
- Entry Fee:** \$150.00 per person includes course/cart fees, range balls, tee gift, prize fund and tax. A player only pays one entry fee regardless of how many teams he may play on. **(No refunds after June 1)**
- Practice** You may call 800-972-6818 seven days in advance to schedule a tee time for a practice round.
- Eligibility:** Fathers may play with up to 3 sons. **At least one partner must be an AGA Member. All out-of-state players must include a copy of their handicap card with entry.** If one member of the team does not have a USGA handicap, the team will play in the Callaway Division. **Father or son must be a resident of Arizona for at least six months prior to the tournament.**
- Field Size:** 290 Teams Flighted

Field fills up within 2 – 3 weeks of date entries are mailed out; so, get your entry in right away.

ENTRIES OPEN 3/17/10

IMPORTANT: PLEASE REMEMBER TO PUT IN YOUR AGA MEMBER #

(Please Circle One)

AGA member out of state member pro no handicap
 Member # _____ State Association _____
 Father's Name _____ E-mail Address _____
 Address _____ City _____ State _____ Zip _____
 Day Phone # _____ Cell Phone # _____ Fax # _____

(Please Circle One)

AGA member out of state member pro no handicap
 Member # _____
 Son's Name _____ E-mail Address _____
 Address _____ City _____ State _____ Zip _____
 Day Phone # _____ Cell Phone # _____ Fax # _____

Special requests to play with another team or family members should be listed below

If paying by credit card, please provide the information we need for billing: We do not accept Discover Card

Card Type _____ Card # _____ Exp. Date _____ CVV# _____

**Make checks payable & mail to: Arizona Golf Association, 7226 N. 16th St. Ste. 200, Phoenix, AZ 85020
For information, call Courtney Smyser: 602-944-3035**

By signing below the team understands that the event runs from 6:30am June 5th until 7:30pm June 6th and agrees to play at any tee time assigned within this time frame.

X _____