



# Member Outing Group Registration

Want to sign up a group for SCGA Member Outings?

Simply fill out the form below and mail or fax to the SCGA Club Services Department.

Fax: 818-980-5019 Address: SCGA, 3740 Cahuenga Blvd, Studio City, CA 91604

<b>Member Outing Course:</b>		<b>Event Date:</b>
<b>Player 1 Name:</b>		<b>Member No. :</b>
<b>Address:</b>	<b>City/State:</b>	<b>ZIP Code:</b>
<b>Club Affiliation:</b>	<b>E-mail:</b>	<b>Phone:</b>
<b>Player 2 Name:</b>		<b>Member No. :</b>
<b>Address:</b>	<b>City/State:</b>	<b>ZIP Code:</b>
<b>Club Affiliation:</b>	<b>E-mail:</b>	<b>Phone:</b>
<b>Player 3 Name:</b>		<b>Member No. :</b>
<b>Address:</b>	<b>City/State:</b>	<b>ZIP Code:</b>
<b>Club Affiliation:</b>	<b>E-mail:</b>	<b>Phone:</b>
<b>Player 4 Name:</b>		<b>Member No. :</b>
<b>Address:</b>	<b>City/State:</b>	<b>ZIP Code:</b>
<b>Club Affiliation:</b>	<b>E-mail:</b>	<b>Phone:</b>

**PAYMENT FOR ALL PLAYERS LISTED ABOVE IS DUE IN FULL WITH THIS FORM**

**Paying by credit card? (total amount of all tournaments requested for ALL players on this form will be charged)**

Visa  Master Card  AMEX

Card No. \_\_\_\_\_ Exp. date \_\_\_\_\_ Total \$ \_\_\_\_\_

Name on Card \_\_\_\_\_ Sec Code \_\_\_\_\_ Signature \_\_\_\_\_

**Paying by check? Make check(s) payable to Southern California Golf Association and mail to SCGA with entry.**