



2025 4 Person – June 7<sup>th</sup> and 8<sup>th</sup>  
 SENIOR CASH SCRAMBLE REGISTRATION FORM

TEAM NAME				
	<b>Name</b>		<b>Handicap</b>	
GOLFER 1				
GOLFER 2				
GOLFER 3				
GOLFER 4				
<i>TOTAL Team Handicap</i>				
			<b>A</b>	<b>\$640</b>
Rental Cart(s) needed		Y	N	
How many rental carts?				
<b>Total Cart \$</b> (\$84/rental) <i>(*If you do not need rental carts Section B will be \$0)</i>			<b>B</b>	
<b>Team Registration \$ Total</b> (A+B)				

- Please fill out the REGISTRATION form, **include payment (before May 30<sup>th</sup>)**, and:
  - Drop off at the Clubhouse
  - email to [hannatee@hannagolf.ca](mailto:hannatee@hannagolf.ca)
  - Or Mail (with payment) to: Hanna Golf Club PO Box 955, Hanna, AB T0J 1P0

**Please include TEAM NAME with your payment option to better track registration**

If you have any questions, feel free to reach out.

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 Clubhouse Manager  
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 Tournament Director  
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