



PGA

Carolinas Section

CPGA Area: _____

Event Name: _____

Date: ____/____/____
(Month) (Day) (Year)

Facility: _____ **Location:** _____/_____
(City) (State)

Format: _____

Number of Players: _____

Entry Fee: \$ _____

Course Fees: \$ _____ / player = \$ _____

Sanction Fees: \$ 8 / player = \$ _____

Purse: \$ _____

Submitted by: _____

E-mail: _____

Phone Number: _____

***Please attach complete results and prize distribution**

Ben Weeks
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