



# 2019 RESERVATION *for* TEE TIMES

**TIME:** \_\_\_\_\_ **DAY:** \_\_\_\_\_

1. Reserved tee times for foursomes on Saturday or Sunday only. Starting Times are for April 27, 2019 through October 27, 2019.
2. Reserved foursomes must report to starter 30 minutes prior to reserve starting time, indicating readiness to “tee off” as scheduled.
3. Members who fail to maintain the pace of play will be asked to leave the course. Expected rate of play is 4 1/2 hrs.
4. Golfers not planning to play at their reserved time **MUST** notify the golf shop at least 48 hours in advance. Any member failing to do so will be charged for a greens fee. **THIS WILL BE STRICTLY ENFORCED.**
5. The management reserves the right to revoke any reserved starting time for cause which, in its own judgment, is valid. Repeated abuse of the golf course and facilities, failure to observe proper golf etiquette: including slow play, failure to repair ball marks and divots, and improper behavior may be considered sufficient cause.
6. The management will determine if starting times are going to be delayed due to “Acts of God”, such as: fog, rain, darkness, frost, etc.
7. \$1,500.00 payment must accompany this contract and be received by us on or before September 21 (FOR EXISTING MEMBERS). If it is not received before the deadline, your time slot will be opened up on a first come, first serve basis.  
RACK RATE FOR ANY NEW MEMBERS/OLD MEMBERS AFTER THIS TIME WILL BE \$2,400.
8. Electric carts are mandatory on weekends. Due to inclement weather, management reserves the right to deny cart use. (This will be only under extreme conditions.)
9. The renewal of your contract is not guaranteed; it is left to the discretion of management.
10. **No partial payment will be accepted, must be paid in full with contract by due date.**

**1.** \_\_\_\_\_  
Name

\_\_\_\_\_

Street

\_\_\_\_\_

City

\_\_\_\_\_

Phone

**3.** \_\_\_\_\_  
Name

\_\_\_\_\_

Street

\_\_\_\_\_

City

\_\_\_\_\_

Phone

**2.** \_\_\_\_\_  
Name

\_\_\_\_\_

Street

\_\_\_\_\_

City

\_\_\_\_\_

Phone

**4.** \_\_\_\_\_  
Name

\_\_\_\_\_

Street

\_\_\_\_\_

City

\_\_\_\_\_

Phone

\_\_\_\_\_ Date \_\_\_\_\_ authorized