



REGISTRATION FORM

THIS FORM, PAYMENT, AND THE APPROPRIATE RELEASE FORM MUST BE TURNED IN PRIOR TO YOUR FIRST QUALIFYING EVENT.

*Mail applications to:
Byron Wilson
21 Club Tournament Director
5469 Brockway
Saginaw, MI 48638
(989) 295-6872*

I acknowledge receiving a copy of the 21 Club RULES AND REGULATIONS and have read and understand them. I agree to abide by these Rules and Regulations. I also acknowledge the appropriate release (waiver) form(s) must be signed and returned prior to my participation. I also understand that a one-time \$50.00 registration fee must be paid prior to my participation.

All checks should be made payable to the 21 Club.

Date

Signature

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**PLEASE PRINT:**

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Street Address, City, State, Zip

\_\_\_\_\_  
e-mail Address

\_\_\_\_\_  
Date of Birth (Must be under 21 by August 13<sup>th</sup>)