

## **ORR LAKE GOLF CLUB**

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## **LEAGUE REGISTRATION**

LAST NAME	FIRST NAME	
MAILING ADDRESS		
TOWN/CITY	PROVINCE	POSTAL CODE
EMAIL ADDRESS		
HOME PHONE NUMBER_	FAX NI	UMBER
EMERGENCY CONTACT_	PHO	NE
MEMBER YES / NO	(Please Circle One)	
LEAGUE		

TIME WELL SPENT www.orrlakegolfclub.ca