

PLEASE RETURN THIS SECTION WITH PAYMENT TO RESERVE THE JUNIORS SPOT IN THE PROGRAM
MAKE CHECKS PAYABLE TO OSHKOSH COUNTRY CLUB
11 W Ripple Ave Oshkosh, WI 54902

JUNIOR'S NAME: _____ JUNIOR'S AGE: _____

Parent/Guardian: _____ Cell Phone #: _____

Email: _____

Address: _____ City: _____ Zip: _____

Check one: ___ Nicklaus ___ Palmer ___ Player ___ Watson