

State Line Heritage Days

Golf Cart Poker Registration

Please Print

Team Name: _____

Spokesperson Name: _____

Street Address / PO Box: _____

City: _____ State _____ Zip: _____

Email Address: _____

Daytime Phone #: (_____) _____

Cellular Phone #: (_____) _____

I _____, confirm the above information to be correct and we state that we have read, understand, and agree to abide by all the General Rules of State Line Heritage Days and the Golf Cart Poker Run Contest Rules