



# High School Golf League Membership Form



**Please complete this form and make checks payable to Heather Downs Country Club.**

**Name:** \_\_\_\_\_ **Birthdate:** \_\_/\_\_/\_\_

**Address:** \_\_\_\_\_

**Phone#:** \_\_\_\_\_

**School:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Parents Name:** \_\_\_\_\_

**Emergency#:** \_\_\_\_\_

**Please send entries along with \$160 fees to:**

**Heather Downs Country Club  
3910 Heatherdowns Blvd.  
Toledo, Ohio 43614**