

All-State Invitational Golf Tournament Information Form

School Hosting Event:	
Dates of Event:	
Number of Teams Participating:	
Golf Coach in Charge of Competition:	
Mailing Address:	
City, State, Zip Code	
Phone Number	
Course/Club Where Event is Being Held:	
School Year of Event:	

List of Teams Playing in Event:

1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	

List of Top 7 Individuals including ties in Event:

1.	
2.	
3.	
4.	
5.	
6.	
7.	

Please mail to:
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