



2024 Open Tournament Refund Form

(All submissions must be received by May 13, 2024)

Name: _____ Phone _____
Address: _____ City _____
State _____ Zip _____
Email Address: _____

Handicap Events

_____ Teams @ \$132.50 _____
_____ Doubles on this entry @ \$53 per pair _____
_____ Singles on this entry @ \$26.50 each _____
_____ AE HCP on this entry @ \$10.50 each _____

Optional Scratch Events

_____ Teams @ \$50 _____
_____ Doubles on this entry @ \$20 per pair _____
_____ Singles on this entry @ \$10 each _____
_____ AE HCP on this entry @ \$10 each _____

Checks will be issued to the Team Captain who is then responsible for disbursing the entry fees to their team-mates. The captain will be required per USBC rule 304 to do so within 30 days or risk suspension.

Requestor printed name: _____

Please submit this form to:

Michigan State USBC * P.O. Box 217 * Grandville, MI 49468
OR - You can fill out this form, save it, and email to office@michiganstateusbc.com
OR - You can also fax it to: 616-635-2034
Your patience is appreciated as we process all requests.