



Pine Ridge Country Club Golf Outing Application

Please Send Contract And Deposit To:
Pine Ridge Country Club
28 Pleasant St. N. Oxford, Ma. 01537
(508) 892-9188 (508) 892-4509 Fax

Tournament Name: _____
Coordinator: _____ Work Phone: _____
Address: _____ Home Phone: _____
City: _____ Cell Phone: _____
State: _____ Zip: _____ Email: _____

Outing Information: Deposits: Weekday: \$250.00 Weekend: \$500.00
Date: _____ Day: _____ Start Time: _____

(Check One)

Weekday: Tee-Times 71 & Under Modified Shotgun 72-99 Players Full Shotgun 100 Plus Players
\$45.00 Per Player
Weekend: Tee-Times 71 & Under Modified Shotgun 72-119 Players Full Shotgun 120 Plus Players
\$55.00 Per Player

Estimated Number Of Players: _____ Guaranteed Number: _____
Format Of Play: _____ Scoring: Pine Ridge Staff: _____ Other: _____

Please Note: Guaranteed Number Of Players Must Be Submitted 10 Days Prior To Event.
This Will Be The Minimum Number That You Will Be Charged. Players Can Be Added To This Number
* **All Tournaments Will Have A Maximum Of 5 Hours Of Play Time.**

(Please Make Sure You Let Your Players Know That This Will Be Strictly Enforced)

Food & Beverage Arrangements: Banquet Start Time: 6:30 PM
Meal Choice: _____ Meal Number: _____
Beverage Cart: _____ (Over 72 Players) Grill: _____ (Over 72 Players)

Proximity Contests

Closest To Pin: Hole: Hole: Hole: Hole: Hole: Closest To The Line: Hole: Hole:
Please Circle: (2) (4) (9) (11) (15) Please Circle: (8) (14)
Longest Drive: Men Hole: Hole: Hole: Longest Drive: Woman Hole: Hole: Hole:
(8) (13) (14) (8) (13) (14)
Special Contests: Putting Contest () Hole In One: () Yardage Needed: ()

I have read the Pine Ridge Country Club contract and outing policies and agree to all the terms and
Liabilities and Time conditions therein:

Signature: _____ Date: _____
Organization: _____ Deposit Amount: \$ _____
Tax ID # _____

Please Sign, and send back, with your deposit.