



18th ANNUAL

MWAGA All Disability Open

SEPTEMBER 8th – 9th, 2018

JOIN THE FUN!!

Greetings golfers!

MWAGA's Annual tournament will be held this year on Saturday and Sunday September 8th and 9th at St Andrews Golf Course, West Chicago, IL. The optional scramble will be Friday September 7th at Bartlett Hills Golf Course in Bartlett IL.

We emphasize camaraderie and having a good time. You do not need to be a good golfer to participate. We have competition at any level you desire.

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18TH ANNUAL MWAGA All Disability Open

SEPTEMBER 8th & 9th, 2018

FUND RAISING SCRAMBLE FRIDAY SEPTEMBER 7th

Bartlett Hills Golf Course 800 W Oneida Ave.
Bartlett IL (630) 837-2741

12:30 PM Shotgun Start.....11:00 AM Check-in

\$90.00 - Amputees.....\$135 – Non Amputees

Includes: 18 holes of golf/shared cart, Lunch Voucher..... Post-scrabble buffet.....Prizes

ALL DISABILITY OPEN SATURDAY AND SUNDAY SEPTEMBER 9 & 10

St Andrews Golf Course 3 N 441 ILRoute 59
West Chicago, IL (630) 231-3100

Saturday: Check in – 11:00 AM.....***Tee Times start – 12:00 PM***

Banquet – 6:30 PM

Sunday: check in – 7:00 AM.....***Shotgun start – 7:30 AM***

Buffet and awards – immediately after round

\$100.00 Amputees

Includes: Saturday & Sunday greens fees/shared cart, Saturday banquet, Sunday buffet and awards lunch

ACCOMMODATIONS

Hilton Garden Inn 4070 E Main St, St Charles, IL 630-584-0700

Mention the Midwestern Amputee Golf Association (MWAGA) when making your reservations at Hilton Garden Inn



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NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE #: _____ **E-MAIL:** _____

SPOUSE/GUEST NAME: _____

Type of Disability/Amputation _____ Average score/hdcp _____

Senior Flight 70 (as of 9/9) & older _____ Open Flight _____

TOURNAMENT ENTRY FEES

\$100.00 for both days: *open to players with disabilities only* \$ _____

Junior players with disabilities 17 and under FREE for the first time \$ FREE

Sat. banquet & Sun Buffet lunch \$ Included

FRIDAY SCRAMBLE (OPTIONAL)

\$135.00 for non-players with disabilities \$ _____ Team application on back

\$90.00 players with disabilities

GUEST

\$35.00 for Sat. banquet and Sun buffet lunch \$ _____

CONTRIBUTIONS: MWAGA General Fund \$ _____

Bud Sanders Memorial Scholarship Fund \$ _____

TOTAL AMOUNT DUE \$ _____ **Make checks payable to**

Midwestern Amputee Golf Association

Mail form to: **MWAGA**
P.O. Box 1354
Northbrook, IL 60065-1354



SCRAMBLE TEAM APPLICATION

Disability Player Name: _____

Address:

1. Name: _____

Address:

2. Name: _____

Address:

3. Name: _____

Address:

4. Name: _____

Address:

Please enclose fees for each scramble player.