

# Bonnie Braes 2024 League Enrollment Form

1. Name: \_\_\_\_\_

2. Email Address: \_\_\_\_\_

3. Summer Door County Address:

\_\_\_\_\_

\_\_\_\_\_

4. Summer Cell Phone (\_\_\_\_\_) \_\_\_\_\_

**\*Please check:**

\_\_\_\_ \$30.00 Membership Fee    \_\_\_\_ \$10 (Optional) Mulligan (1 per week)

\_\_\_\_ \$7.50 (Optional) Chip-in and Low Putts Contest (weekly)

\_\_\_\_ **\$47.50 Total Amt Due with League Membership Fee and the two  
"Optional Choices" above**

\_\_\_\_ **\$30.00 Total Amt Due with ONLY the League Membership Fee**

\*Date you plan to first start playing: \_\_\_\_\_

**Make your check payable to Bonnie Braes Golf League and mail both the form and your check to Laura Maloney by May 13th, 2024.**

**Laura Maloney  
10490 S Appleport Ln  
Sister Bay, WI  
54234**