

Classic Golf Club

4908 208th Street East – Spanaway, WA 98387
(253) 847-4440
www.classicgolfclub.net



Tournament Contract

Group Name: _____ Number of Players: _____

Tournament Chairperson: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone (work): _____ Fax: _____

Email: _____

Tournament Date: _____ Time: _____ Deposit: _____

Conditions of Tournament Contract

This contract is to lay out the proposed event with corresponding cost and to confirm your date and time. To continue to hold this date, we need a \$500.00 non-refundable deposit due upon receipt of this confirmation, which will be deducted from your total charges. In addition we require 50% of the cost due in the pro-shop two (2) weeks prior to your event, with a verification of the number of guests that will be attending. If the tournament is cancelled the deposit will be forfeited.

No food, beverage or coolers will be allowed to be brought onto the premises by either participants or sponsors and will be subject to confiscation. We will have a beverage cart on the golf course to service the tournament.

As tournament chairperson you will be held responsible for all actions on the golf course by those players participating in your tournament including damage to the course, facilities, power carts, third parties person and/or property.

The chairperson by his or her signature signifies that he or she understands and will comply with the terms of this contract. Please make a copy of this contract and send original signed agreement with your deposit.

Signature (Tournament Chairperson): _____

Date: _____