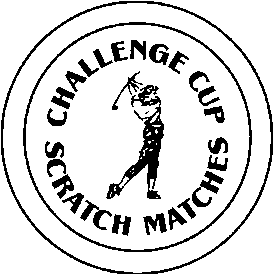
**CHALLENGE CUP SCRATCH MATCHES**



Application Form from Prospective Club

|  |  |
| --- | --- |
| **Prospective Golf Club Name:** |  |
| **Your Name (Captain):** |  |
| **Email:** |  |
| **Telephone:** |  |
| **Co-Captain Name:** |  |
| **Email:** |  |
| **Telephone:** |  |
| **Golf Professional Name:** |  |
| **Title:** |  |
| **Signature (Golf Professional)\*:** |  |
|  | \*We accept the host club responsibilities set forth on the introduction sheet when our sponsored club team becomes a participating team in Challenge Cup. |

The Form along with a roster by handicap index of at least 12 qualified individual playerscan be scanned and emailed to challengecup@challengecupgolf.org