

# Southern California Mexican American Golf Association



## TWO-MAN SCRAMBLE TOURNAMENT SUNDAY MARCH 19th 2017

Menifee Lakes Country Club  
29875 Menifee Lakes Dr.  
Menifee, Ca.92584  
951 672-4824

Entry Fee: \$85.00 p/p  
8:30 A.M. Shotgun

S.C.M.A.G.A. Members:

The format for this tournament will be select-shot throughout, tee-shot, fairway shot, and putts. Each team member must have at least 3 tee shots per 9 holes. You may select your own partner or one may be available. The March index will be used (10stroke differential) and of the combined partners' handicap, one quarter (1/4) will be used for net scores. In the event of ties the USGA method for card offs will be used.

Gross and Net teams will be recognized winners. The Overall Gross Winners and Net Winners will have their 2017 entry fee paid. Gross skins, Team Low Net and Closest to pin will be available at \$30 Per team, payable at the course. **NOTE:** Net skins will not be available.

The entry fee includes green fees, cart and **BBQ Buffet** after the round. This is a popular tournament; last year we had an excess of 86 players. Please coordinate with your Chapter Tournament Chairman to sign up and payment for the entry fee. If you cannot contact your Chairman see below for payment information. Dress code will be strictly enforced. No tank tops, bare feet or any clothing with obscene words or pictures. Collared shirts are required, as are soft spikes.

Please make a strong effort to participate in this event and support our organization in the first association tournament for this year. The entry deadline will be **March 9, 2017**. As per course policy, fees must be paid in advance, so please send your payment A.S.A.P. You may make your check or money order payable to **S.C.M.A.G.A.** For those who cannot contact you Tournament Chairman **mail to Claudio Arechiga 2569 Cottonwood Trail Chino Hills, CA. 91709**

Thank you,

**Claudio Arechiga**  
**SCMAGA**  
**Tournament Chairman**  
**(951) 314-0285 (Cell)**  
**clydeusc@yahoo.com**

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**Entry Form: Must be received by March 9, 2017**

Name: \_\_\_\_\_ Chapter \_\_\_\_\_ 7-Digit Handicap # \_\_\_\_\_

Name: \_\_\_\_\_ Chapter \_\_\_\_\_ 7-Digit Handicap # \_\_\_\_\_