

Nor-Dor Golf League 2025 Registration Form

Return to: Mike Novotny
PO Box 730
Ephraim, WI 54211
Phone: 920-854-9148, cell: (920) 421-2929
Email: sjnmen@yahoo.com

Please Return by: May 1, 2025

PLEASE PRINT

Name: _____ Spouse First Name: _____ required

Summer Address: _____ required

Winter Address: _____

Summer Phone Number: _____ required

Winter Phone Number: _____

E-mail address: _____ required

Return Date: _____ (For golfers that head south for the winter, if you will return to Door County later than June 1st, please mark your return date.)

Average 9 hole score: _____ (New Members Only)

Please return this registration form and a check by May 1 so that we have time to assign teams and create the season schedule.

Make checks payable to Nor-Dor Golf League in the amount of \$50 as a regular member if received by May 1st. May 2nd will be \$55.00 for regular member. \$20 as a sub.

- I do not wish to play this year.
- Please remove my name from your mailing list.
- I wish to play as a sub only this season. My \$20.00 check is enclosed.