

PLAYER'S CHOICE HANDICAPPING TOURNAMENT



ENTRY DEADLINE IS 5:00 P.M. THE FRIDAY BEFORE THE TOURNAMENT DATE
NO LATE ENTRIES WILL BE ACCEPTED

Name: _____ Phone: _____

Signature: _____ Email: _____

Home address: _____ Postal Code: _____

HPI Account # _____ Player Reward # _____

Please circle date entering for: October 3 October 31 November 28 December 12

Entry fee: \$25 - Paid by: _____
(cash, credit card, e-transfer, points)

Bankroll: \$60 - Paid by: _____
(cash, credit card or e-transfer)

PLEASE NOTE THAT ENTRY FEE AND BANKROLL MUST BE PAID AT TIME OF ENTRY

FOR INTERNAL USE ONLY

Date: _____ Time: _____

Received by: _____

Location: _____