

# PLAYER'S CHOICE HANDICAPPING TOURNAMENT



**ENTRY DEADLINE IS 4:00 P.M. THE FRIDAY BEFORE THE TOURNAMENT DATE  
NO LATE ENTRIES WILL BE ACCEPTED**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Email: \_\_\_\_\_

Home address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

HPI Account # \_\_\_\_\_

Tournament date: \_\_\_\_\_ January 25 \_\_\_\_\_ February 22 \_\_\_\_\_ March 29 \_\_\_\_\_ April 26

**TOTAL \$85** (entry fee \$25 and bankroll \$60)      **Paid by:**    cash    credit card    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: \_\_\_\_\_