

Gleneagles Golf Club
 2615 Glenwood Drive
 Twinsburg, Ohio 44087
 Phone: 330-425-3334
 Fax: 330-425-2042



Golf Event Contract

Group Name: _____ Contact: _____

Mailing Address: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Day & Date	Start Time (Every 9 minutes)	Number of Players

A guaranteed number of golfers must be received 7 days in advance. The confirmed number is the number you will be billed for unless actual count is greater. This applies to both golf and dinners. Final count due to course by the date of _____.

Price per golfer: \$ _____ (18 holes w/cart) *Payment is due on the day of the event*

Beverage Pricing	Proximity Information
Beer	
Full Keg	Contest
Domestic <u>\$120</u>	Hole # _____
Import <u>\$130</u>	Long Drive _____
½ Keg	Closest to Pin _____
Domestic <u>\$70</u>	Long Putt _____
Import <u>\$80</u>	Other: _____
Cases – 24 cans	
Domestic <u>\$40</u>	Lunch: _____
Import <u>\$40</u>	Cost: _____
Pop (Pepsi Products)	Dinner: _____
Cases – 24 cans <u>\$17</u>	Cost: _____
20 oz. Bottles <u>\$30</u>	

Special Requests: _____

Group Representative	Course Representative
Date	Date