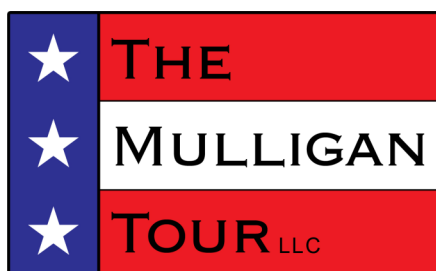


2017 APPLICATION

Full Membership **\$120**
(\$100 if paid by March 10, 2017)

Limited Membership **\$80**
(Play in 6 events max.)

Complete this form and return with payment to:
(make check payable to "Mulligan Tour Holdings LLC")
(or use the "Current" option)



The Mulligan Tour Holdings LLC
123 E Walled Lake Dr
Walled Lake, MI 48390

Name: _____

Address: _____

Phone: _____

e-mail: _____

(required)

I do hereby agree to abide by the Rules and Regulations of the Mulligan Tour (as described on the Mulligan Tour website found at www.themulligantour.com) and, furthermore, will not hold liable the Mulligan Tour LLC, Mulligan Tour Holdings, LLC or any of its Managers for any injuries sustained while participating in golf tournaments sanctioned by the Mulligan Tour LLC and Mulligan Tour Holdings, LLC

SIGNATURE

DATE

(Optional) I would like to routinely play with the name above
(Members must list each other to be considered playing partners)