



1st Playing of the

Men's City Match Play Championship



Lincoln Greens Golf Course and Piper Glen Golf Club

May 19th- June 16th

Qualifying Round Sunday, May 19th at Lincoln Greens.

Match Completion Schedule

<u>Matches</u>	<u>Dates</u>
1st Round	May 20th-26th
2nd Round	May 27th- June 2nd
Semi Finals	June 3rd- June 9th
Finals	June 10th- June 16th

FORMAT:

- Sunday May 19th, 18 holes of qualifying at Lincoln Greens Golf Course starting at 9:00 a.m.
- **Championship Flight** will consist of low 16 individuals. Ties for 16th spot will be decided by a sudden death playoff beginning immediately following posting of the last score or at a time communicated by the golf course. It is the player's responsibility to find out what time a playoff will begin. Other ties for seeding will be broken by comparing last nine, last six, last three, then hole by hole going backward.
- All play will be from the **WHITE** tees at Lincoln Greens and the **BLUE** tees at Piper Glen
- Number of flights and the number of players/flight will be determined by the total # of entries.
- Top ½ of the flights will play matches at Lincoln Greens.
- Bottom ½ of the flights will play matches at Piper Glen.
- Tournament pairings will be posted at Lincoln Greens Golf Course, Piper Glen Golf Club, and online at www.Piperglen.com and www.springfieldparkdistrictgolf.org.
- Players will be emailed the contact information for all players in their respective flights.
- Players must arrange matches. If a match is not completed within the tournament time table, a coin toss will decide who moves on.

REGISTRATION:

- **ENTRY FEE: \$50 per player.**
- A Tournament rate of \$20.00 (cart included) to be paid when playing a match.
- Season Passes will be valid if playing at your home course.
- Qualifying tee times will be assigned with paid registration only.
- Entry form must be complete and entry fees paid in full for all registered players.
- Deadline: Wednesday May 15th- 5pm



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ENTRY FORM

Name: _____

Age: _____

Home Phone: _____

Cell Phone: _____

City/Zip: _____

EMAIL: _____

Qualifying Round Tee Time Request*: _____

Pairing requests*: _____

*Tee time preference will be given in the order the registration form is received with payment. If requesting to be paired with certain individuals, tee time preference will be based on when the **LAST** player's form is turned in.

REGISTRATION DEADLINE – WEDNESDAY MAY 15th 5:00 PM

All forms must be turned into:
Lincoln Greens Golf Course
700 East Lake Dr
Springfield, IL 62712
Make checks payable to "Lincoln Greens GC"

By signing below, I attest all information above is correct and I understand the tournament format listed

X _____

For Pro Shop Staff Only:

Date: ___/___/___ Time: _____ Amount Pd: _____ Form of Payment: _____ Initials: _____