



**Tri-Fecta 27 Hole Scramble**

**FEE: \$240 per team  
\$160 per team Season Passholders**

**Player 1**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_

**Handicap Info**

GHIN # \_\_\_\_\_

OR

Name of System \_\_\_\_\_  
Player ID# \_\_\_\_\_

**Player 3**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_

**Handicap Info**

GHIN # \_\_\_\_\_

OR

Name of System \_\_\_\_\_  
Player ID# \_\_\_\_\_

**Payment Info**

Account Number \_\_\_\_\_  
Expiration \_\_\_\_\_ CVV \_\_\_\_\_  
Cardholder Signature \_\_\_\_\_

**RETURN ENTRY TO:**

Pebble Creek Golf Club  
Tri Fecta  
P.O. Box 250  
Becker, MN 55308

**Player 2**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_

**Handicap Info**

GHIN # \_\_\_\_\_

OR

Name of System \_\_\_\_\_  
Player ID # \_\_\_\_\_

**Player 4**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_

**Handicap Info**

GHIN # \_\_\_\_\_

OR

Name of System \_\_\_\_\_  
Player ID # \_\_\_\_\_