



SPEEDGOLF REGISTRATION

**PLAY
SPEED
GOLF**.COM

ISGA International SpeedGolf Alliance

DATE: _____ TIME: _____

#	FIRST NAME	LAST NAME	CONTACT EMAIL/CELL	EXPERIENCE	HANDICAP	FITNESS	TOTAL	PAID
ex	STEVE	TYLER	STYLER123@MAIL	2	1	2	5	<input checked="" type="checkbox"/>
1								<input type="checkbox"/>
2								<input type="checkbox"/>
3								<input type="checkbox"/>
4								<input type="checkbox"/>
5								<input type="checkbox"/>
6								<input type="checkbox"/>
7								<input type="checkbox"/>
8								<input type="checkbox"/>
9								<input type="checkbox"/>
10								<input type="checkbox"/>
11								<input type="checkbox"/>
12								<input type="checkbox"/>
13								<input type="checkbox"/>
14								<input type="checkbox"/>
15								<input type="checkbox"/>
16								<input type="checkbox"/>
17								<input type="checkbox"/>
18								<input type="checkbox"/>
19								<input type="checkbox"/>
20								<input type="checkbox"/>

				<u>SG EXP</u> -1: (NOVICE) -2: (INTERM) -3: (ADVNC D)	<u>GOLF HND CP</u> -1: (HIGH) -2: (MID) -3: (LOW)	<u>FITNESS</u> -1: (LOW) -2: (AVG) -3: (HIGH)	Add Together Pair up w/ similar totals	
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