

# Louisiana Redbud Golf Tournament

## 4-PERSON SCRAMBLE REGISTRATION FORM

SATURDAY, MARCH 22, 2025

*FIRST 18 PAID TEAMS*

CONTACT PERSON: _____
ADDRESS: _____
CITY/ZIP: _____
PHONE: _____

If you have a team of 4 golfers, please list the individuals you will golf with below:  
\$300.00 a team or \$75.00 per player, must be received prior to the tournament.  
*Rental Carts are limited availability and Rented ONLY through the Pro Shop.*

NAME	ADDRESS	PHONE

**DEADLINE: COMPLETE & RETURN REGISTRATION FORM BY MARCH 15, 2025.**

**PLEASE MAKE CHECKS PAYABLE TO:**

LOUISIANA REDBUD FESTIVAL  
P.O. BOX 1  
VIVIAN, LA 71082

CONTACT: KAYLA HALE FOR DETAILS  
(318) 840-8693

**Amount Enclosed:**

\$ \_\_\_\_\_