



## **TOURNAMENT / GROUP BOOKING REQUEST FORM**

Thank you for your interest in having Cedar Hill Golf Course host your event.Please complete the information required below and return this form via email to:Laird White, Director of Golflaird@lakelandgolfmanagement.com

All requests are reviewed in accordance with the Group Booking and Tournament Guidelines. As posted on the District of Saanich website	
GROUP NAME: COORDINATOR (S)	
NAME Phone number (s)	EMAIL
NAME Phone number (s)	EMAIL
Please provide up to 3 dates in order of pro Preferred date	reference Please provide a brief description of you event
Option #1 Option #2 Option #3	
REQUESTED START TIME	AM PM
<b>Type of event</b> Group Booking 12-24 people Tournament 25+ Type of format: Individual () Scrar	#of holes (circle) Food & Beverage 9 18 Yes 9 18 No 9 18 No
Anticipated participation number Final confirmed number are required 7 days in advance THIS IS THE MINIMUM AMOUNT TO BE CHARGED	
REQUEST ARE REVIEWED AS RECEIVED AND EVERY EFFORT IS MADE TO PROVIDE RETURN CORRESPONDENCE WITHIN 5 BUSINESS DAYS. THANK YOU	
OFFICE USE ONLY Request received on	
BOOKED ( )UNABLEUPLOADED TO TEE SHEET ( )ReasoninDEPOSIT REQUIRED (Y) (N)	E TO HOST EVENT ( ) ing
CORRESPONDENCE SENT	STAFF SIGNATURE