



**FRAN LOVE MEMORIAL**  
**TWO MAN BEST BALL TOURNAMENT**

You are cordially invited to play in the annual Fran Love Memorial Tournament to be held at the St. Johnsbury Country Club. All participants are invited to enjoy an optional 18 hole practice round on Friday May 23<sup>rd</sup> followed by two days of best ball tournament play on Saturday and Sunday May 24<sup>th</sup> and 25<sup>th</sup>.

**TOURNAMENT FORMAT**

The format for the 36 hole event will be a better ball of two gross. In the event of a full field, each two-man team will be placed in one of six flights of sixteen teams based on their combined team handicap. There is a maximum handicap differential between partners of five strokes. If a player is above the five shot differential his handicap will be adjusted to within five strokes of his partner to determine flight assignments.

**ENTRY FEE: \$ 150.00 PER TEAM**

**PRIZE BREAKDOWN**

The prize breakdown within each flight is based on a full field of 96 teams.

1 <sup>st</sup> place team \$ 600.00	3 <sup>rd</sup> place team \$ 250.00
2 <sup>nd</sup> place team \$ 400.00	4 <sup>th</sup> place team \$ 150.00

All players must be able to provide a valid handicap card at the time of registration.  
Tee times for Friday's practice round will be accepted one week in advance.  
Requests for Saturday starting times and pairings will be honored if at all possible.  
Sunday tee times and pairings will be determined by Saturday's results.

*Please fill out the attached entry form and return to*  
Fran Love Memorial  
C/O St. Johnsbury Country Club  
P.O. Box 116  
St. Johnsbury, VT 05819

Entry forms returned without payment will not be accepted. Entry fees are payable by check or credit card.  
Entries will be accepted on a first come first served basis.

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Player's Name \_\_\_\_\_ Phone # \_\_\_\_\_ USGA Index \_\_\_\_\_ Ghin # \_\_\_\_\_

Mailing Address \_\_\_\_\_ Home Course \_\_\_\_\_

Player's Name \_\_\_\_\_ Phone # \_\_\_\_\_ USGA Index \_\_\_\_\_ Ghin # \_\_\_\_\_

Mailing Address \_\_\_\_\_ Home Course \_\_\_\_\_

Make \$ 150.00 Check Payable to St. Johnsbury Country Club, or  
Bill my credit card Visa or Mastercard # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Desired tee time and/or pairing for Saturday's round \_\_\_\_\_

