



2019 SOUTHWEST TEAM CHALLENGE

WHEN

DECEMBER 8-11

***PRACTICE ROUND SUN; COMPETITION ROUNDS MON-WED**

WHERE

RIO SECCO GOLF CLUB

2851 GRAND HILLS DR., HENDERSON, NV 89052

FORMAT

**FOUR-BALL STROKE PLAY @ GROSS USING A MODIFIED
STABLEFORD SCORING SYSTEM.**

TEAMS

**A TEAM IS COMPRISED OF FOUR PLAYERS – TWO MID-AMS (25+)
AND TWO SENIORS (50+)**

***ALL FOUR PLAYERS CAN BE 50+, BUT TWO WILL BE DESIGNATED
TO PLAY THE MID-AM TEES.**

HOTEL PACKAGES SUNDAY, MONDAY & TUESDAY NIGHTS

Property	SUN Dec 9	MON Dec 10	TUE Dec 11
# of Rooms	15	15	15
PLANET HOLLYWOOD	\$57	\$44	\$44

SATURDAY (\$153) AND WEDNESDAY (\$44) NIGHT STAYS ARE AVAILABLE

To register: <https://book.passkey.com/go/SMAZG9>
or call 866-317-1829

SCHEDULE

SUNDAY DEC. 8

Practice Round

10:30a.m. shotgun

3:30p.m. Welcome Reception

MONDAY, DEC. 9

First Round

10 a.m. shotgun

2:30 p.m. Lunch

TUESDAY, DEC. 10

Second Round

10 a.m. shotgun

2:30 p.m. Lunch

WED., DEC. 11

Final Round

10 a.m. shotgun

2:30 p.m. Lunch & Awards

GOLF PACKAGE

\$590 PER PLAYER

**4 rounds of golf @ Rio
Secco Golf Club**

Practice balls & cart

Welcome Reception

Lunch daily

Trophies for winning Team

***Rooms *NOT* included in Golf
Only package & players are
responsible for making their
own lodging arrangements**

2019 SW TEAM CHALLENGE

Hosted by Rio Secco Golf Club

December 8-11, 2019

Please return this completed form to hold a spot for a team at the 2019 SW Team Challenge. The team information and \$500 team deposit are due to the AGA office by Monday, November 19. Team spots will be filled on a first-come, first-served basis. Payment can be submitted via check to the address below or via credit card by calling the AGA Office @ (602) 944-3035 and ask for Mike or Alex. For questions regarding the event contact Tim Eberlein @ 602-872-7019.

The below team information can be mailed with the check or emailed to mmason@azgolf.org.

Mail to: Arizona Golf Association
ATTN: Mike Mason
7600 E. Redfield Rd. Ste. #130
Scottsdale, AZ 85260

Team Commitment Form

PLEASE PRINT the following information:

State/Regional Golf Association representing: _____

Team Captain: _____ Phone: _____

Email: _____

Mid-Am Player 1 Name: _____ Email: _____

Phone: _____ Age: _____

Mid-Am Player 2 Name: _____ Email: _____

Phone: _____ Age: _____

Senior Player 1 Name: _____ Email: _____

Phone: _____ Age: _____

Senior Player 2 Name: _____ Email: _____

Phone: _____ Age: _____

*Team can be comprised of four senior players, but two players will play the Mid-Am tees.

Please check one of the following payment options:

_____ Team deposit of \$500 is enclosed

_____ Players will make individual payments** via credit card

**Please call (602) 944-3035 and speak with Mike or Alex to pay for "SW TEAM CHALLENGE"