

**Sangamon Valley Conference
Men's and Women's
Golf Tournament
October 1, 2009**

Tournament Host: The High School of St. Thomas More

Tournament Manager: Pat Hettermann
217-352-7210
psettermann@hs-stm.org

Athletic Director: Dan Hennessey
dhennessey@hs-stm.org

Lake Of The Woods Golf Course
405 N. Lake Of The Woods Road
Mahomet, Illinois 61853
217-586-2183

Green Fees for Tournament: \$20.00 per player – this includes range balls

Practice Rounds: Call the course to set up tee-times – 217-893-2183

Practice Round Green Fees: \$18.50 – No range balls

Checks payable to: Lake Of The Woods Golf Course

Checks for both golf and lunches- Please mail checks to:

Pat Hettermann
The High School Of St. Thomas More
3901 N. Mattis Ave.
Champaign, IL 61822

Tournament Shotgun Start at: 9 am

Coaches meeting: 8:15 am

Lunch orders need to be placed by the September 24. Please be prompt with the lunch count for Lake of The Woods. See attached lunch order form.

Lunch Cost: \$5.00 per lunch

**Lunch Menu: Hamburgers or Hot dogs or Brats
chips and a fountain drink**

For directions and a scorecard go to: www.golfthelake.com

Pairings will be emailed/faxed immediately after we have received them.

They will be set up in the Wave pattern that is being used at the State Tournament

School Name: _____

Coach: _____

Lunch Order Form:

Number of Hamburgers: _____

Number of Hot Dogs: _____

Number of Brats: _____

Total number of lunches (players/coaches): _____

Total cost for lunches: _(\$5 each)_____

Check enclosed: _____ Amount: _____

*** Any Food Allergies? _____

Please fax /email the lunch order by September 24, 2009 to:

Pat Hettermann

The High School of St. Thomas More

FAX: 217-352-7213

phettermann@hs-stm.org

SVC Men's Golf Tournament Roster Form

School Name: _____

Coach: _____

Coach's email: _____

Contact Phone Number: _____

Newspaper number to fax results to: _____

Total number of players on Men's team _____

#1. _____ **Ave. Score** _____

#2. _____ **Ave. Score** _____

#3. _____ **Ave. Score** _____

#4. _____ **Ave. Score** _____

#5. _____ **Ave. Score** _____

#6. _____ **Ave. Score** _____

SVC Women's Golf Tournament Roster Form

School Name: _____

Coach: _____

Coach's email: _____

Contact Phone Number: _____

Newspaper number to fax results to: _____

Total number of players on Women's team

#1. _____ **Ave. Score** _____

#2. _____ **Ave. Score** _____

#3. _____ **Ave. Score** _____

#4. _____ **Ave. Score** _____

#5. _____ **Ave. Score** _____

#6. _____ **Ave. Score** _____