



**Golf Course Superintendents Association  
of New Jersey**  
25 US Highway 46 West  
Wayne, New Jersey 07470  
1-866.427.2651 • Fax: 973.812.6529 • [www.gcsanj.org](http://www.gcsanj.org)

**2015  
THE TERRY STANLEY CUP RULES  
Sign up by 4/25/15**

The rules for this tournament are very simple. This is a straightforward match play format. There are no handicaps involved. Play a match at a mutually picked course and play until someone wins in an 18-hole match.

Please try to schedule a match ASAP because it is hard to find a date since we are all busy. Once a match is scheduled, that is the official date. If a player cancels out for a match, the match can be played with 2 against 1 or perhaps 1 on 1 or it can be rescheduled as long as it fits into the time allowed.

**Include a \$20.00 payment for your team when you return the registration form on next page.**

If you want to play and do not have a partner, send a \$10.00 payment, and we will arrange a match for you. It may be in a different division, but we will do our best for you. You will need to sign up by April 25, 2015.

Make check payable to GCSANJ or add credit card info below.

**Form must be returned by April 25, 2015**

Once we have the brackets, a time schedule will be set up. The GCSANJ golf committee will enforce deadlines for the Stanley Cup and there are no extensions. At least one member of each team will be notified 7-10 days prior to the deadline that a match must be completed. If needed, a match can be played 1 on 1 or 2 on 1 if there is a scheduling conflict. If the match is not completed by the deadline, each team will have an odd or even number listed on the brackets. The winner will be decided whether the NJ Lottery evening Pick 3 is odd or even on the day of the deadline.

Mark Peterson  
Chair  
609-839-1998



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## 2015 THE TERRY STANLEY CUP REGISTRATION FORM

### Sign up by 4/25/15

TODAY'S DATE: \_\_\_\_\_  
Name: \_\_\_\_\_ Class \_\_\_\_\_  
Club: \_\_\_\_\_  
Club Address: \_\_\_\_\_  
Phone to contact you if needed: \_\_\_\_\_  
EMAIL for updates \_\_\_\_\_

#### Names of your team members: (Please print)

1. \_\_\_\_\_ 2. \_\_\_\_\_

HDCP Index 1: \_\_\_\_\_ HDCP Index 2: \_\_\_\_\_

Choose the division that you want to be placed:

**North** \_\_\_\_\_ **South** \_\_\_\_\_  
**\$ 20.00 PER TEAM** **\$ 10.00 (I have no Partner)**

You must pay with this form. We do not invoice clubs for this event. Sorry, no refunds.

**Total Amount \$** \_\_\_\_\_

PAYMENT BY: Check  # \_\_\_\_\_ CREDIT CARD:  Visa  Mastercard  Amex

CARD #: \_\_\_\_\_ // \_\_\_\_\_ // \_\_\_\_\_ // \_\_\_\_\_ //

EXPIRATION DATE (MM/YY): \_\_\_\_\_ // \_\_\_\_\_ SECURITY CODE #: \_\_\_\_\_

Bill Address: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Make Checks Payable to: GCSANJ  
Mail to: GCSANJ Terry Stanley Cup  
25 US Highway 46 West, Wayne, NJ 07470-6801  
Ph: (973) 812-0710 • Fax: (973) 812-6529 • [execdirector@gcsanj.org](mailto:execdirector@gcsanj.org)