



2009 Contestant Media Information Sheet

This information is designed to assist the media in covering IGA events. Please return this completed form to the IGA office at the address below, Fax or (preferred) scan and email to jason@iowagolf.org or cpitts@iowagolf.org.

**Please return to: Iowa Golf Association
8515 Douglas Avenue, Suite 25
Urbandale, Iowa 50322
FAX: (515) 331-3636**

Name _____
Last First Middle Nickname

Address _____

Birthdate _____ Height _____ Weight _____

Occupation _____ Employer _____

High School _____ Grad Yr. _____ College _____ Grad Yr. _____

College golf?(If yes, where?) _____ Major _____

Are you a reinstated amateur? _____ If yes, when reinstated? _____

Name of club/course you play or are a member _____

Best finish(es) in Iowa Amateur Championship (Year & site) _____

Best finish(es) in other IGA events & point events _____

Tournaments you have won or been runner up (include year) _____

Lowest 18 hole competitive round (When, where?) _____

Hole-in-one information: How many? _____ (When, where) _____

Other golf honors and awards _____

Name of hometown newspaper _____

Name of hometown television & radio stations _____

Family info _____