

BLETCHINGLEY GOLF CLUB

Junior Masters ~ 18 Holes Strokeplay

Monday 6th August 2012



QUALIFYING event within the 2012 Surrey Boys Order of Merit
Daily Telegraph qualifier (scratch)

Open to both Boys and Girls aged under 18 as at 1st January 2012
Full Handicap allowance will apply ~ Maximum - Boys 28, Girls 36
Handicap Certificates will be required

Scratch and Net Prizes will be awarded

Entry Fee Non-Members ~ £23.00 ~ Ballot could be held
Fee includes a meal at the end of play and prizes
Competitors will be expected to stay for the Prizegiving

The Club's normal dress code will apply both on the course and in the clubhouse.

CADDIES WILL NOT BE ALLOWED

Cheques will be held until the **CLOSING DATE** of **22nd JULY, 2012**
No refunds will be made after this date

A start sheet will be despatched approximately two weeks before the competition date



ENTRY FORM ~ Bletchingley G C Junior Masters ~ Monday 6th August 2012

Name ----- Date of Birth -----

Address -----

----- Post Code -----

Home Tel ----- Mobile -----

Email -----

Home Club ----- Handicap -----

Please enclose **Cheque** with **Application Form** for **£23.00** payable to **Bletchingley Golf Club** and send to:

Steven Cookson, Golf Manager,
Bletchingley Golf Club,
Church Lane, BLETCHINGLEY, Surrey, RH1 4LP.

Contact Tel No: 01883 744848

Email: stevec1412@yahoo.co.uk

BLETCHINGLEY GOLF CLUB

Parental Consent Form – Junior Open Meetings



Please complete using **BLOCK CAPITALS** and return with Application Form

FULL NAME		DOB	
ADDRESS		HOME TEL NO.	
		MOBILE	
		CLUB	

PLEASE INDICATE WHO SHOULD BE CONTACTED IN CASE OF AN EMERGENCY

NAME		RELATIONSHIP	
HOME TEL NO.		WORK TEL NO.	
MOBILE		EMAIL	
ALTERNATIVE MOBILE		RELATIONSHIP	

PLEASE LIST ANY SPECIAL MEDICAL PROBLEMS AND GIVE DETAILS OF MEDICATION USED

CONDITION	MEDICATION	
IS HE/SHE SENSITIVE/ALLERGIC TO INSECT BITES/STINGS?	YES/NO	
IS HE/SHE ALLERGIC TO FOODS SUCH AS NUTS/SEAFOOD? IF YES, PLEASE SPECIFY	YES/NO	
IS HE/SHE ALLERGIC TO PENICILLIN OR ANY OTHER MEDICINE? IF YES, PLEASE SHOW SUBSTITUTE NORMALLY USED	YES/NO	
IS HIS/HER TETANUS INJECTION UP TO DATE?	YES/NO	

PLEASE GIVE DETAILS OF ANY SPECIFIC DIETARY REQUIREMENTS

PLEASE PROVIDE ANY FURTHER INFORMATION THAT YOU FEEL IS APPROPRIATE

In the event of my child becoming ill or suffering injury whilst playing golf I am happy for Bletchingley Golf Club to treat or arrange medical care as necessary, should I not be immediately contactable.

PARENT/GUARDIAN'S NAME:

SIGNATURE:

DATE: