

# PRESTWICK ST CUTHBERT GOLF CLUB

## ENTRY FORM

To: The Secretary of Prestwick St Cuthbert Golf Club, East Road, Prestwick, KA9 2SX

Please accept my entry for your \_\_\_\_\_ Open on \_\_\_\_\_

My name \_\_\_\_\_

My address \_\_\_\_\_

Postcode \_\_\_\_\_ Telephone No. (incl area code) \_\_\_\_\_

My Handicap is \_\_\_\_\_ at \_\_\_\_\_ Golf Club, SSS \_\_\_\_\_

Age on the day (if applicable) \_\_\_\_\_ Preferred tee time \_\_\_\_\_ AM or \_\_\_\_\_ PM

Alternative tee time \_\_\_\_\_ AM or \_\_\_\_\_ PM

I enclose the entry fee of £ \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

### **Pairs & Team Entries and/or Travelling Arrangements**

Partner 1 Name \_\_\_\_\_ Club \_\_\_\_\_ Age \_\_\_\_\_ H'cap \_\_\_\_\_

Partner 2 Name \_\_\_\_\_ Club \_\_\_\_\_ Age \_\_\_\_\_ H'cap \_\_\_\_\_

Partner 3 Name \_\_\_\_\_ Club \_\_\_\_\_ Age \_\_\_\_\_ H'cap \_\_\_\_\_

The above entrants are playing/travelling together and request tee times within 30 minutes of each other if possible.

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For St Cuthbert use only

To \_\_\_\_\_ of \_\_\_\_\_ Golf Club

Event \_\_\_\_\_ On \_\_\_\_\_

Thank you for your entry fee.

You have been allocated the following tee time \_\_\_\_\_

Please check in 15 minutes beforehand. Handicap certificates will be required YES/NO

**PLEASE ENCLOSE SAE IF NOT A MEMBER OF PRESTWICK ST CUTHBERT GC**