

DIRECTORS' CUP

(DCGU Merit Event No. 4)

36 Holes Men's Scratch & Handicap Medal

Exeter Golf & Country Club

On Saturday 8th May 2010

ENTRY FORM (issued by DCGU)

Name (Block Capitals):

Home Address:

Post Code

Daytime Tel No.

Exact Active Handicap

Home Club:

I certify that the entrant's handicap shown is correct at (Date)

.....Signed by Home Club Handicap Secretary

CDH Pin No:.....(if known)

Entrants are requested to provide below details of any Medical Condition(s) and/or Prescribed Medication (in case of an emergency)

.....

Emergency Contact Name

& Contact No

If the entrant is under 18 years of age, this form must be accompanied by a copy of a Parental Consent Form (see www.devongolfunion.org.uk) – failure to do so will nullify the entry

I hereby give consent, being the parent/ legal guardian, for the above entrant to enter and play in the selected competition.

Name of Parent/Guardian.....Signed.....

I enclose my Entry Fee of £ 30 - Cheque payable to "Exeter Golf & Country Club"

Signed (Entrant).....

Entry form and Fee to be sent to: Exeter Golf & Country Club, Countess Wear, Exeter, EX2 7AE

Contact: Russell Mayne on 01392 874639 or russell.mayne@exetergcc.co.uk

CLOSING DATE: Monday 19th April 2010