



# St. Neots Golf Club Junior OPEN

Thursday 31<sup>st</sup> May 2018

Open to all Junior Golfers (Boys & Girls) with a CONGU Handicap

Entrants must be under 18 years old on 1<sup>st</sup> January 2018

|   |
|---|
| <b><u>Competition</u></b>                                       |
| Scratch : 18 Hole Medal<br>(Junior Daily Telegraph Qualifier)   |
| Handicap : 18 Hole Medal 0-21<br>Handicap : 18 Hole Medal 22-36 |
| Boys – White Tees<br>Girls – Red Tees                           |
| Nearest To Pin 0-21 H/Cap<br>Nearest To Pin 22-36 H/Cap         |

A current handicap certificate must be produced on the day

Caddies are not allowed, spectators are welcome but must stay at least 50 yards from players and not assist.

Dress code is golf attire only, no trainers or denim please

## ENTRIES CLOSE 15th May 2018

Entry Fee of £20.00 includes a hot meal after play

Please return your Entry Form, Parental Consent Form and cheque payable to St Neots Golf Club to:

Paul Toyer, Director of Golf  
St. Neots Golf Club, Crosshall Road, St. Neots  
Cambridgeshire. PE19 7GE

Copies of entry forms can be found at:

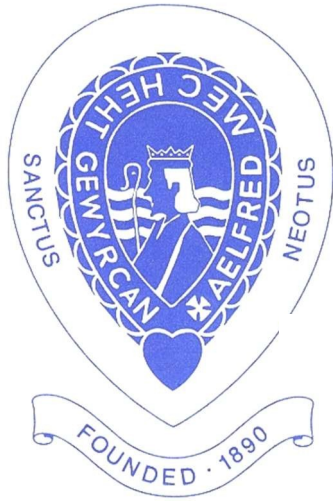
<http://www.sngc.co.uk/visitors/open-days/> or visit the  
Golf Empire website



St Neots Juniors

Telephone: 01480 472363  
Email: [golf@stneotsgolfclub.co.uk](mailto:golf@stneotsgolfclub.co.uk)  
Website: [www.sngc.co.uk](http://www.sngc.co.uk)





# St. Neots Golf Club Junior OPEN

Thursday 31<sup>st</sup> May 2018

## ENTRY FORM

Name:..... Age (at 1/1/18).....  
Home Club:.....  
Home address:.....  
.....  
.....  
Postcode:.....Telephone:.....  
Email address:.....  
CDH Number:.....  
I prefer to receive notification of start times by Email / Post (circle as required)

|                   |                  |                            |  |
|-------------------|------------------|----------------------------|--|
| Handicaps 0 to 21 | My handicap is - | I enclose £20.00 entry fee |  |
|-------------------|------------------|----------------------------|--|

|                    |                  |                            |  |
|--------------------|------------------|----------------------------|--|
| Handicaps 19 to 36 | My handicap is - | I enclose £20.00 entry fee |  |
|--------------------|------------------|----------------------------|--|

(Please make cheques payable to "St. Neots Golf Club")

A current handicap certificate must be produced on the day  
Caddies are not allowed, spectators are welcome but must stay at  
least 50 yards from players and not assist.

Dress code is golf attire only, no trainers or denim please

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St. Neots Golf Club, Crosshall Road, St. Neots  
Cambridgeshire. PE19 7GE



Telephone: 01480 472363  
Email: [golf@stneotsgolfclub.co.uk](mailto:golf@stneotsgolfclub.co.uk)  
website: [www.sngc.co.uk](http://www.sngc.co.uk)



# St. Neots Golf Club

## PARENTAL CONSENT FORM



It is important that St. Neots Golf Club is aware if your child suffers from any illness or medical condition, or has any special dietary needs. It is also important that we are able to contact you in the unlikely event of an emergency. Could you please, therefore, complete the following sections. St. Neots Golf Club will hold the information given in strict confidence and you are asked to ensure that any changes are notified at once using the contact information at the foot of the page.

Name of Junior: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Main Address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Contact 1

Contact 2

Name of Parent or Guardian: \_\_\_\_\_

Tel – Home: \_\_\_\_\_

Tel – Work: \_\_\_\_\_

Tel – Mobile: \_\_\_\_\_

### Medical details

I consent to my son / daughter receiving medical treatment, which, in the opinion of a qualified medical practitioner, may be necessary.

His / Her NHS Number: \_\_\_\_\_

His / Her registered Doctor and Surgery: \_\_\_\_\_

Doctors / Surgery address: \_\_\_\_\_

Doctors / Surgery Telephone number: \_\_\_\_\_

Please state below if your son / daughter is suffering from any medical conditions, has any allergies, or is taking regular medicine which will affect his / her participation in events organised by St. Neots Golf Club. Details of medication should include dosages, frequency of use and where it would normally be kept (e.g. Golf Bag). Please indicate if there are any special dietary needs of which we should be aware or of any other circumstances which may relate to the care of your son / daughter.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Photography

As part of our responsibility to safeguard the welfare of competitors, permission is sought from parents or guardians for photographs, which may be used in a publication (Junior Newsletter, Local Newspaper, etc.) or may be shown in a public place (e.g. Club Noticeboard, Club Website, SNGC Juniors Facebook page etc.). If you do not wish such images to be used please tick here  and every effort will be made to comply with your preference.

Signature of Parent / Guardian: \_\_\_\_\_ Date: \_\_\_\_\_