

COVENTRY MENS OPEN

SATURDAY 11TH AUGUST 2018

CONDITIONS

1. The competition is open to male members of recognised golf clubs, having a playing handicap of 18 or less under the current Unified Handicapping System of C.O.N.G.U
2. The competition committee reserves the right to refuse entry without having to give a reason
3. In the event of a competitor having to scratch after 27th July 2018, the entry fee will not be refunded
4. The competition committee reserves the right to fix/alter starting times
5. Competitors must conform to the Rules of Golf as approved by The Royal & Ancient Golf Club of St Andrews and the local rules of Coventry Golf Club
6. All ties will be decided by the last 9,6,3 or 1 holes of the card
7. All disputes shall be decided by the competition committee whose decision will be final
8. Coventry Golf Club cannot accept responsibility for thefts and accidents and competitors must carry their own insurance
9. Competitors must protect themselves in Health and Safety matters, especially should there be a danger from lightning, when play must stop immediately and not be resumed until the danger has passed
10. If there is a one blast of a klaxon, play must stop immediately and not be resumed until two short blasts of the klaxon are heard
11. Competitors must comply with any further conditions advised on the day of the competition
12. Competitors are requested to change from golf clothes following play. Smart casual dress is acceptable

Please make cheques payable to Coventry Golf Club
or ring 02476 414152 (office) to pay by card payment

Please return Application form with email contact address or stamp addressed envelope and Payment to:
The Opens Administrator, Coventry Golf Club, St Martins Road, Finham, Coventry, CV3 6RJ
If more than one player, correspondence will only go to the lead applicant

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PLEASE ENCLOSE ENTRANCE FEE: £30.00 VISITOR £15.00 MEMBER

PLEASE ENSURE CDH NUMBER IS COMPLETED

PLAYER ONE NAME:	
FULL NAME OF HOME CLUB:	
DATE OF BIRTH:	CDH NO:
HANDICAP:	
CONTACT TELEPHONE NO:	
CONTACT EMAIL ADDRESS:	
TEE TIME: (CANNOT BE GUARANTEED)	

PLAYER TWO NAME:	
HOME CLUB:	HANDICAP:
CDH NO:	DATE OF BIRTH:
EMAIL ADDRESS:	

PLAYER THREE NAME:	
HOME CLUB:	HANDICAP:
CDH NO:	DATE OF BIRTH:
EMAIL ADDRESS:	