

St. Neots Golf Club Junior OPEN

Monday 24th August 2020

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

Entrants must be under 18 years old on 1st January 2020

Competition

Scratch: 18 Hole Medal

(Junior Daily Telegraph Qualifier)

Handicap: 18 Hole Medal 0-18

Handicap: 18 Hole Medal 19-36

Boys - White Tees

Girls - Red Tees

Nearest To Pin 0-18 H/Cap Nearest To Pin 19-36 H/Cap

A current handicap certificate <u>must</u> 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 10th August 2020

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





Telephone: 01480 472363 Email: golf@stneotsgolfclub.co.uk Website: www.sngc.co.uk

St Neots Juniors



St. Neots Golf Club Junior OPEN

Monday 24th August 2020

ENTRY FORM

Name:		Age (at 1/1/20)
Home Club:		
Home address:		
Postcode:	Te	elephone;
Email		
address:		
CDH Number:		
I prefer to receive	e notification of start time	nes by Email / Post (circle as required)
	N. 1 11 1	T 1 (20.00 t C
Handicaps 0 to 18	My handicap is -	I enclose £20.00 entry fee
Handicaps 19 to 36	My handicap is -	I enclose £20.00 entry fee
Tanuicaps 17 to 30	1viy Handicap is -	1 cherose 220.00 chu y rec

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

A current handicap certificate <u>must</u> be produced on the day

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

Telephone: 01480 472363

Email: golf@stneotsgolfclub.co.uk



website: www.sngc.co.uk

St. Neots Golf Club
PARENTAL CONSENT FORM



		emergency. Could you please, therefore, complete the follow
Name of Junior:		75
Date of birth:		
Main Address:		
Postcode:		
	Contact 1	Contact 2
Name of Parent or Guardian:		
Tel – Home:		
Tel – Work:		
Γel – Mobile:		
Medical details		
may be necessary. His / Her NHS Number:		
His / Her registered Do		
Doctors / Surgery addre	ess:	
Doctors / Surgery Telep	phone number:	
regular medicine which we medication should include	ur son / daughter is suffering from any medical conwill affect his /her participation in events organised de dosages, frequency of use and where it would respecial dietary needs of which we should be awards son /daughter.	ed by St. Neots Golf Club. Details of normally be kept (e.g. Golf Bag). Please
		- Q
Photography	WOFT	

Signature of Parent / Guardian:			Date;		
St. Neots Golf Club, Crosshall Road, St. Neots, C	St. Neots Golf Club, Crosshall Road, St. Neots, Cambridgeshire, PE19 7GE. Tel; 01480 472363				