

TEE OFF
AT
BADGEMORE PARK
SO MUCH **MORE** THAN A COURSE

JUNIOR OPEN (HUMPHREYS TROPHY)
WEDNESDAY 31ST JULY 2019

Open to

Boys and girls under the age of 18 (on 1st of January)

Name

Format

18 holes stroke play

CDH

Handicaps

Boys max 28, Girls max 36. Proof of handicap or a CDH Number must be available on the day

DOB

Allowance

Full

Email

Tees

Boys - White

Girls - Red

Phone no

Prizes

Best Gross score for the Humphreys Trophy & Scotty Cameron putter

Golf club

Best nett score for the Handicap Shield

Best Girls Score (if not picking up a major prize),

Nearest the pin And Longest Drives

Entry Fee

£20.00 inclusive of lunch & soft drink. Entrance fees cannot be refunded after the closing date

Dress

Golf shirt, trousers or tailored shorts are required on the course and smart casual dress in the clubhouse. No jeans are permitted for players

Start Times

From 10am, will be sent by email after the closing date

Closing Date

Entries must be received by Monday 15th July 2019

PAYMENT: Please send your entry form, parental consent form and cheque (payable to Badgemore Park Golf Club) to:

Asa Phillips - Golf Sales Coordinator, Badgemore Park, Henley-on-Thames, Oxon, RG9 4NR

golf@badgemorepark.com
T: 01491 637300. Professional Shop: 01491 574175

PARENTAL MEDICAL CONSENT FORM.

This MUST be completed and returned.

Once completed this form must be signed by parents/guardians. Strictly confidential.

Emergency Contact 1

Parents/Guardians Names.....

Mobile no..... Home no.....

Work no

Emergency Contact 2

Parents/Guardians Names.....

Mobile no..... Home no.....

Work no

Medical Information. GP's details:

GP Name.....

GP Address.....

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Tel no.....

1. Does your child experience any conditions requiring medical treatment and/or medication? Yes/No
If yes please give details:

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2. Does your child have any allergies? Yes/No
If yes please give details:

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3. Does your child have any specific dietary requirements? Yes/No
If yes please give details:

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PARENTAL MEDICAL CONSENT FORM CONT...

4. Please provide any further information that you feel is appropriate.

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I confirm to my best knowledge that my son/daughter does not suffer from any medical condition other than those detailed above.

I,being parent/guardian of the above-named child hereby give permission for Badgemore Park Golf Club to give the immediately necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son/daughter's interest, in the doctors medical opinion, for any delay to be incurred by seeking my personal consent.

Signed - Parent/Guardian:

Print Name:.....

Date: