

**NSWVGA MATCHPLAY CHAMPIONSHIPS**

**ENTRY FORM**

**31 MAY - 4 JUNE 2021**

**Registration Sunday 30 May , 5pm at Nelson Bay Golf Club**

**If you require a cart please contact the Pro Shop at each club to make booking and payment.**

**Please tick if you’re using a cart \_\_\_\_\_\_\_**

**NELSON BAY: 4981 2073 HORIZONS: 49820474 PACIFIC DUNES: 49160500**

 **Mon 31 May & Fri 4 June Thurs 3 June Tues 1 June**

SURNAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PREFERRED GIVEN NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POST CODE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GOLFLINK NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HOME CLUB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HANDICAP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am affiliated with the NSWVGA, or its interstate counterpart, through Group No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I confirm that the information supplied is correct, as at this date, and that I am eligible to enter under the “Tournament Conditions” as listed, being bound by these conditions.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment Schedule:

Men: $160 4 rounds of golf + Meet & Greet + Presentation Dinner $...............................

Ladies: $160 4 rounds of golf + Meet & Greet + Presentation Dinner $...............................

Non Golfers: $40 Meet & Greet + Presentation Dinner $...............................

 **TOTAL PAYABLE $.............................**

**Dietary requirements? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ENQUIRIES:** Tournament Director Dave Flatt: 0410 419967 vetsmatchplay@gmail.com

**DIRECT DEPOSIT:** NAB BSB: 082 748 ACC: 858676618 Reference – Match and Surname

**CHEQUES:** Please make cheques out to NELSON BAY GOLF CLUB and post to:

 NELSON BAY GOLF CLUB

 PO Box 33

 NELSON BAY NSW 2315

**CREDIT CARD: EXP: CCV:**

**Name on card: Signature:**