



**WEST WILTS GOLF CLUB**

# **JUNIOR OPEN**

**(DAILY TELEGRAPH QUALIFIER)**  
**MONDAY 29 JULY 2019**

**Boys 18 Hole Medal 0 – 28**  
**Girls 18 Hole Medal 0 – 36**

**Prizes for Visitors & Home players**

**Entry Fee £15**  
**(includes food)**

**Closing date: Wed 24 July 2019**

**Conditions of Entry**

Eligibility: Under 18 years on 1<sup>st</sup> Jan 2019

Handicap certificates or CDH numbers will be required on the day

The Committee reserves the right to amend, alter or adjust any conditions of entry.

It will also settle any disputes that might arise, and its decision will be final.

Enter via e mail to [admin@westwiltsgolfclub.co.uk](mailto:admin@westwiltsgolfclub.co.uk)  
Find form under Visit tab at [www.westwiltsgolfclub.co.uk](http://www.westwiltsgolfclub.co.uk)

**Or send entry to:**

Junior Organiser  
West Wilts Golf Club  
Elm Hill, Warminster,  
BA12 0AU

**WEST WILTS GOLF CLUB**  
**JUNIOR OPEN**

**Monday 29 July 2019**

**Entry Form**

**18-hole Medal for Boys (h/c 0-28) and Girls (h/c 0-36)**

Under 18 years on 1 Jan 2019

Name ..... Date of Birth..... Handicap.....

Your CDH number: (found on your handicap certificate) .....

Golf Club..... Your Telephone No .....

Home Address.....

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E-mail (if you have one) .....

**If you do not have an e-mail address, please send a stamped addressed envelope**

I would like to enter (please tick): 18 Hole Medal [  ]

**Prizes will be awarded immediately after the last players are in. Please stay for the presentation if you have won a prize.**

**Please send, with your entry fee to:  
Junior Organiser, West Wilts Golf Club  
Elm Hill, Warminster, BA12 0AU**

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**PARENTAL MEDICAL & PHOTOGRAPHIC CONSENT FORM**

If your child will not be accompanied by a parent/guardian/family member on the day we must have the following details:

Junior's Name ..... Parent/Guardian's Name.....

Emergency Telephone Number .....  
(We **must** be able to contact you on the day)

Doctor's Name & Telephone Number .....

Any Medical Conditions/Allergies .....

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If you do not want your child to be included in any photographs, please indicate by ticking the box: [  ]

Signed: ..... (Parent/Guardian) Date: .....

**Competitors enter all competitions and take part at their own risk. Please check you have adequate insurance. The Club accepts no liability for any loss of equipment or injuries incurred.**