



**Women's Golf Victoria Club Member Clinic**  
*Open to female golfers who hold a Golf Australia Handicap  
 between 7 and 24 at an affiliated WGV member club*

**Tuesday 8 September 2009 and Wednesday 9 September 2009**  
**Woodlands Golf Club**

**Entries Open** Monday 27<sup>th</sup> July 2009                      **Handicap Limit** 7 – 24 at date of entry

**Entries Close** Friday 28<sup>th</sup> August 2009                      **Entry Fee** \$245 (inc GST)

**Participant Details – Please write in BLOCK letters**

<b>Competitor Name</b>	(Given Name)	(Surname)
<b>WGV Membership Number</b>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<b>Home Club</b>
<b>GolfLink Number</b>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<b>Handicap</b>
<b>Email</b>		
<b>Postal Address</b>		<b>Post Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>Suburb</b>		<b>State</b>
<b>Home Phone</b>		<b>Mobile</b>
<b>Contact number during clinic</b>		<b>DOB</b> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>
<b>Signature</b>		<b>Date</b> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / 09

**Payment Details (and Tax Invoice) – WGV ABN 71 754 264 244**

<b>Payment By</b>	Cheque <input type="checkbox"/>	Money Order <input type="checkbox"/>	MasterCard <input type="checkbox"/>	Visa <input type="checkbox"/>
Please make Cheques payable to Women's Golf Victoria				
<b>Card Number</b>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
<b>Expiry Date</b>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	<b>Amount Paid</b>	\$245.00	
<b>Name as it appears on card</b>		<b>Late Entry Fee (if applicable)</b>	\$	
<b>Signature</b>		<b>TOTAL</b>	\$	
<b>Office Use Only</b>	A/C – 4-2500	JOB - 252	Budget - ADULT	

**Special Dietary Requirements** \_\_\_\_\_

**Return to: WGV Adult Development Coordinator**  
 PO Box 608, Elsternwick, VIC 3185  
 Phone: 03 9524 7605      Fax: 03 9524 7666      Email: leah@womensgolf.org.au