



ABN 81 497 939 594
 Golf South Australia Inc.
 North Adelaide Golf Course
 Strangways Terrace
 North Adelaide 5006
 PO Box 423
 North Adelaide 5006
 T 08 8267 1353
 F 08 8267 1437
 admin@golfsa.com.au
 www.golfsa.com.au
 facebook.com/golfsouthaustralia
 @golfsouthaus

TALENT ID PLAYER CONTACT DETAILS

play golf

Full Name:

Date of Birth:

Residential Address:
 Number & Street:

Suburb/Town:Post Code

Contact Details:

- Home Phone:
- Mobile:
- Player E-mail Address:

Parent/Guardian :

Name:

Relationship to you:

Parent E-mail Address

Contact Telephone: Mobile:.....Home:

Home Golf Club:

Golf Link Number:

Handicap:

Home Coach:

Coach Contact: Phone: Email:.....

Please Note: Junior Players Correspondence
Golf SA will send all correspondence to either the home address or to the Parent/Guardian email address.



Photography Consent:

During events, photographs maybe taken of you or your child for publicity purposes. Photographs may appear in mass media such as television and websites. Due to the privacy act 1988 we are required to receive consent in order to take and publish your child's Photograph.
I have read the details above and give permission for me and or my child's photographs to be used to promote golf and Golf SA.

Name of Child:

Print Full Name Parent/Guardian:

Signature Parent/Guardian:

Golf Playing:

Golf Practice: (What do you do to maximize your golf potential – Sports medicine, sports science, strength & conditioning? Provide Details)

Recent Playing Schedule (Events Played):

Why should I be selected into the Talent ID Development Program? (please write a short paragraph)