THAXTED PARK GOLF CLUB SENIOR AND JUNIOR VARDON

VARDON TROPHY EVENT- 36 HOLE STROKE PLAY
SUNDAY 4th August 2013

CONDITIONS

- Open to all male amateur golfers with an Australian Handicap of 8 or less (12 for players under the age of 18) and Female amateur golfers with an Australian Handicap of 14 or less.
- Entry Fee of $40 (GST incl.), which includes light lunch, **must** be received with entry form.
- The event will be conducted and controlled by the match committee of the Thaxted Park golf club,
- Rules covering the event will be those adopted by the Royal and Ancient Club of St. Andrews in conjunction with the local rules.
- Competitors must start at the appointed time. Rule 6-3 will apply
- In the event of a tie, there will be a three-hole play off using holes 7, 8, 9.
- S.A.G.A. conditions with respect to drug testing and code of conduct will apply
- Club dress rules shall apply to both entrant and caddy.
- Metal spikes are not permitted. Golf shoes **NOT** permitted in the lounge area for lunch. Appropriate shoes must be worn in the lounge area after 36 holes.
- Competitors must play with approved 1.68" golf ball and grooves on club faces of iron clubs must comply with 30 degree method of measurement in accordance with appendix 11 of the rules of golf.
- Entries must reach the Thaxted Park Golf Club NO LATER than 5.00p.m on Monday 22nd July 2013.
- Starting times will be available from the club professional on Thursday 1st August
- Telephone: 8325 1636
- The Thaxted Park Golf Club heat policy will be used for this event
- Thaxted Park Golf Club advises that in the interest of safety all players and caddies exercise extreme caution during hot temperature conditions.
- Practice rounds are available at a cost of $25.00 (discounted rate).
- Thaxted Park Golf Club will not accept responsibility for non-receipt of faxed entries

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Thaxted Park Cup

Men ☐ Ladies ☐
Senior ☐ Junior ☐

Name: _____ D.O.B (juniors) _____

Address: _____

Telephone: _____

Home Club: _____ A.G.U. Handicap: _____

Competitors Signature: _____

Club Managers Signature: _____

PAYMENT DETAILS: I have enclosed a Cheque/Money Order/Cash for $40

Please charge my: BANKCARD MASTERCARD VISA

Expiry Date: ____/____ Signed: _____

FAX: 8325 1020 POST: PO BOX 98 Woodcroft S.A 5162