

2017 T.L. WARREN TROPHY & W. GIBSON TROPHY RESULT SHEET

Please complete this form with all relevant information, and ensure it is signed by the Captains of both teams. This form must be held on file by the home club and results entered into the online score recording system.

Please advise results to AAP by phoning 9322 8000.

Date:				Actual starting time:						
Venue:										
WARREN			N	or	GIBSON			(pleas	(please circle)	
				1						
Club				VS	Clu	ub				
Pair	Player	First Name / Last Name)	Win/Res		Pa	iir	Player (First	t Name / Last Name)	Win/Res	
1					1	L			-	
2					2					
3					3	3				
TOTAL					TOTAL					
				•						
Golf Club defeated						Golf	Club	matches to	matches to	
Signature of Team Captain:					Signature of Team Captain:				_	