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Male Player:	Female Partner:
Surname:	Surname:
First Name:	First Name:
Club:	Club:
	Golf Link No:
All entrants must hold a current GA Handicap. Golf Link No. must be provided on Entry Form. Evidence of Club Membership and Current Handicap status must be produced to Committee on request	
A STATE AND A STATE OF A STATE AND A STATE	(Please Circle) (See info sheet re Golf Cart Him
Contact Address:	
	State: Post Code:
Telephone:	Mobile:
Email Address:	
Day 1. Saturday 30 Day 2. Sunday 1st Day 3. Monday 2n Entries close Friday 15th Sep	- 10:30 am Shotgun Start - Each Day th September 2017 Finley Golf Club : October 2017 Jerilderie Sports Club d October 2017 Berrigan Golf Club tember 2017 or when field capacity is reached RY FEE \$90 per PAIR
All payme BSB: 03 CIRCLE ONE OF THE FOLLOWING: CHEQU	PAYMENT DETAILS ents to Outback Golf Challenge 82-591 ACC. No. 161474178 E. CASH. CREDIT CARD. DIRECT DEPOSIT. ers Name:
	Expiry Date:
	Signature:
Office Use Only:	00508 A 2023 38 54 COSCUPAT
Amount: Cash/Chq/Ca	rd/DD: Rcpt No: Entered Date: