

Tea Tree Gully Golf Club

RAY SCHWARTZ TROPHY - 36 HOLE STROKE

SENIOR, JUNIOR & LADIES VARDON TROPHY EVENT

Sunday 3rd February 2019

CONDITIONS

1. Open to male amateurs whose GA Handicap does not exceed 5.4, juniors whose GA Handicap does not exceed 10.4 (**Juniors must be under 18 years of age on 11th April 2019**) and female amateurs whose GA Handicap does not exceed 15.4.
2. Entry only accepted with the \$35 Entry Fee; \$50 for entries accepted after closing date; **entries without payment will not be accepted**. No refunds unless notification of withdrawal is received by Thursday 31st January 2019 at 5pm.
3. Lunch and Snack Food after golf provided for all players (caddies at own expense).
4. **Competitors and Caddies must observe TTGGC Dress Code (Denim Jeans not permitted, plain white or Club Logo socks may be worn; golf shoes not permitted to be worn in the Members Bar or Dining Room.**
5. Conditions of Play will be posted on the Notice Board on the day of the event.
6. Entries close on Monday 28th January 2019 at 9am; starting times available on the Club's website on Wednesday 30th January.
7. **Heat Policy:** In the interest of player safety it is recommended that players exercise caution during extreme temperature conditions. However, the Club has a policy, which states that if the forecast temperature for the day as advised by the Bureau of Meteorology at 9am, is 40 degrees or higher the event at the discretion of the Match Committee maybe either abandoned or reduced to 18 holes.
8. Practice Round only Monday 28th January or Friday 1st February at a **Green Fee of \$40.**

Post Entries to: - Tea Tree Gully Golf Club
PO Box 51 ST AGNES SA 5097
or email to ttggc@internode.on.net

RAY SCHWARTZ TROPHY

Adult Vardon Junior Vardon Birth Date _____ Womens Vardon
Name: _____ (Please Print) Golf Link No.

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Home Club: _____ Mobile No.: _____

Competitor's Signature: _____ GA Handicap: _____

EFT PAYMENT TO OUR BANK ACCOUNT - BSB 015249 ACCT 458132961 - TTG GOLF CLUB **OR**

CREDIT CARD DETAILS: MASTERCARD VISA

Expiry Date: ____/____/____ Signed: _____

Card No.

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Office Use:

Date Received: _____ by _____