

The Park Cup

| Name: | | | | _ D.O.I | В |
|-----------------------------|----------------------|-------------|----------------------|---------|-----|
| Address: | | | | | |
| Phone: | | | | | |
| Email: | | | | | |
| Home Club: | | _ A.G.U. Ha | ndicap: _. | | |
| Golf Link no | | | | | |
| Competitors Signature: | | | | | |
| | | _ | | | |
| Competition Entered | | | | | |
| ☐ Senior Open | □ Sup | er Seniors | | | |
| PAYMENT DETAILS: I hav | e enclosed a Chequ | ıe/Money Oı | rder for | \$40 | |
| Please charge my: | BANKCARD | MAS | MASTERCARD/ VISA | | |
| Expiry Date:/ | Signed: | | | | |
| 1 1 1 1 1 | | 1 1 1 | | 1 | 1 1 |
| | | | | | |
| Credit Card details will be | destroyed after regi | stration | | | |
| Entries to be sent via: | | | | | |
| Litties to be sent via. | | | | | |

Email: info@thaxtedparkgolfclub.com.au

Fax: 8325 1020

Post: PO BOX 98 Woodcroft S.A 5162

