

Portarlington Golf Club Carnival of Golf Entry Form

Date	Event No	Competitor name	Golf Link No	Home Club	Partner/Competitor	Golf Link No	Home Club	Requests	Cost
Sat 29/8	1 Mens 36 Holes								\$
Sun 30/8	2 Mixed 4BBB								\$
Mon 31/8	3 Mens 4BBB								\$
Tue 1/9	4 Veterans Stroke								\$
Wed 2/9	5 Mens Ambrose Pairs								\$
Wed 2/9	6 Ladies Ambrose Pairs								\$
Thur 3/9	7 Ladies 4BBB								\$
Thur 3/9	8 Mens Veterans Stableford								\$
Fri 4/9	9 Ladies 27 Hole Stroke								\$
Fri 4/9	10 Ladies 18 Hole Stroke								\$
Sat 5/9	11 Mens Stableford							7am or 11am	\$
Sat 5/9	12 Ladies Stableford							7am or 11am	\$
Sun 6/9	13 Mixed Canadian								\$

Please make cheques payable to: Portarlington Golf Club Inc.

TOTAL AMOUNT PAYABLE IN FULL \$

Post entries to: Tournament Secretary, Portarlington Golf Club, 130 Hood Road, Portarlington, Vic 3223 Enquiries Phone: (03) 5259 3427

Title: Mr / Mrs / Ms / Miss Given Name: Surname:

Address: Suburb: Postcode:

Email Address: Telephone: (H)- (M) (B)

If you wish to pay using a Credit Card a \$3 Fee Applies and you will need to complete details below:

Card Type (Please Circle) VISA MASTERCARD

I authorise Portarlington Golf Club Inc to debit my catd for \$.....(including \$3 fee)

Cardholders Name:

Signature:

Card Number _ _ _ _ _ _ _ _ _ _ _ _

Expiry Date: _ _ / _ _

ENTRIES CLOSE MONDAY 17TH AUGUST 2009 (OR WHEN FIELDS ARE FULL)