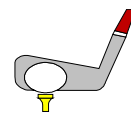


BROOKMANS PARK GOLF CLUB



JUNIOR OPEN

HGU Boys Order of Merit Qualifier

WEDNESDAY 28 JULY 2010

Open to all Juniors Under 18 on 01.01.2010

18 HOLE MEDAL COMPETITION IN 3'S

ENTRANCE FEE £18.00 PER PERSON

Includes prizes AND Lunch

Starting Time-

9am PROMPT from 1st and 10th Tees

Handicap limit-

Boys 28 Girls 35 (Handicap Certificate Essential)

CLOSING DATE 30 June, 2010

NO CHEQUES RETURNED AFTER CLOSING DATE

Please send Entry Form with fees and a stamped addressed envelope to:

Mrs R Carpenter

29 The Grove

Brookmans Park, Herts

AL9 7RL

Tel: 01707 659855

Please make cheques payable to: BROOKMANS PARK GOLF CLUB

ENTRY FORM

BROOKMANS PARK GOLF CLUB JUNIOR OPEN MEETING

MEDAL

WEDNESDAY 28 JULY 2010

ENTRANCE FEE £18.00 PER PERSON

(WITH STAMPED ADDRESSED ENVELOPE)

Name Handicap.....

CDH ID NUMBER Club.....

Home Address

.....Telephone No.....

E-Mail address:.....

**BROOKMANS PARK GOLF CLUB
(BPGC)**

PARENTAL CONSENT FORM

Competitors Name: (Please print)

Please indicate below any health related matters, including injuries, details of any allergies, prescribed medicine and dosage or of any special dietary requirement which you think it is best we know about. Any information given will be treated in the strictest confidence but please be aware that this information will be passed on to the Medical Emergency services should the need arise.

Name of competitors Doctor:.....Doctors Practice Tel No:.....

I,being parent/legal guardian of the above named child, hereby give permission for BPGC to give the necessary authority on my behalf, for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my child's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

USE OF PHOTOGRAPHIC EQUIPMENT

To be completed by parent/legal guardian

I,(Parent's full name) consent to BPGC photographing or videoing..... (Name of child) as a Winner in the Junior Open at BPGC.

I confirm I have legal parental responsibility for this child and am entitled to give this consent. I also confirm that there are no restrictions related to taking photographs.

Brookmans Park Golf Club will take steps to ensure that these images are used solely for the purposes they are intended, which is the promotion and celebration of the activities of our Junior Open.

Signature:

Date

To be completed by child

I.....(Name of child) consent to BPGC photographing or videoing my involvement in golf under the stated conditions.

Signature.....

Date:.....
