



# Royal Ashdown Forest Golf Club

## JUNIOR OPEN MEETING SCGU JUNIOR ORDER OF MERIT

### Monday 5<sup>th</sup> August 2019

Our **2019 Junior Open Meeting** will include:

18 holes (Medal) on the Old Course to be played from the Yellow Tees for boys and Red Tees for girls. Prizes for best gross and handicap scores, girls and boys.

Maximum **active** handicaps of 24 for boys and 28 for girls. Entries are limited to 48 players and if over subscribed there will be a ballot of the higher handicaps.

Competitors must be under 18 on 1st January 2019. No caddies or trolley pullers allowed.

The cost for the competition will be £25 to include lunch. You are asked to bring a change of clothes to wear after play (Jeans and trainers are not permitted). Mobile phones are not permitted either on the course or in the Clubhouse.

*The closing date for entries will be **Friday 19<sup>th</sup> July** after which starting sheets will be sent to all entrants by e-mail. No entry fees will be refunded once starting sheets have been sent out.*

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

First name..... Surname .....

Handicap..... CDH No. ....

Club:.....

Tel No: (incl STD).....

Email address .....

Please return entry forms and cheque for £25 payable to RAFGC to:  
The Secretary, Royal Ashdown Forest Golf Club, Chapel Lane, Forest Row, East Sussex, RH18 5LR

Alternatively, BACS payment can be made to:  
Account no: 96621648  
Sort code: 60-07-17  
Please reference "Junior Open" upon payment.  
**Entries without payment will not be accepted.**

Tel: 01342 822018 •

Email: [Office@royalashdown.co.uk](mailto:Office@royalashdown.co.uk) •

Royal Ashdown Forest Golf Club, Forest Row, East Sussex RH18 5LR •



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[@royalashdown](https://twitter.com/royalashdown)

# Royal Ashdown Forest Golf Club

Child's Name:..... (M/F) D.O.B:.....

Address:.....

..... Post Code:.....

Parent/Guardian Name:.....

Home Telephone:..... Work Telephone:.....

Mobile Telephone:..... E-Mail:.....

1<sup>st</sup> Emergency Contact Name:.....

Home Telephone:..... Work Telephone:.....

Mobile Telephone:.....

2<sup>nd</sup> Emergency Contact Name:.....

Home Telephone:..... Work Telephone:.....

Mobile Telephone:.....

Medical Info: Child's Doctor's Name:.....

Doctor's Telephone:.....

Does your child have any medical condition that requires medical treatment and/or medication?  
Yes/No (please delete as appropriate)

If yes, please supply details:.....

.....

Does your child any allergies? Yes/No (please delete as appropriate)

If yes, please supply details:.....

.....

Does your child have any specific dietary requirements? Yes/No (Please delete as appropriate)

If yes, please supply details:.....

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Please provide any further relevant information:.....

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.....

I can confirm to the best of my knowledge that my child does not suffer from any medical condition other than those detailed. I agree to notify the Club should the above details need to be amended at any time or if my child will not be attending due to illness or injury.

I, ..... being the parent/guardian give consent to my child to participate in the golfing activities under the supervision of Royal Ashdown Forest Golf Club and give the immediate 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 doctors medical opinion, for any delay to be incurred by seeking my personal consent.

Signed..... Date .....

Please Print Name.....