

# ASHBURNHAM GOLF CLUB



## JUNIOR OPEN

on

Friday 14<sup>th</sup> April 2017



**A Dyfed Golfing Union  
Junior Order of Merit Event**



Please contact the Manager on 01554 832269 for more information



# ASHBURNHAM GOLF CLUB



## JUNIOR OPEN

## ENTRY FORM

**Friday 14<sup>th</sup> April 2017**

(Please complete in BLOCK LETTERS)

Full Name .....

Address .....

.....

..... Post Code.....

Home Telephone Number.....

Mobile.....

E-mail.....

Club.....

Handicap.....Date of Birth.....

CDH Number.....

Entry Fee - £10.00 per person including a meal

I enclose cheque/P.O. for £ .00 in payment of Entrance Fee  
(Cheques to be made payable to Ashburnham Golf Club)

Signature..... Date.....

Entries to be sent to  
The Manager, Ashburnham Golf Club, Cliffe Terrace, Burry Port, SA16 0HN  
(Tel: 01554 832269 E-Mail: admin@ashburnhamgolfclub.co.uk)

# EVENT CONDITIONS: JUNIOR OPEN 2017

## ASHBURNHAM GOLF CLUB

1. Format: Boys, handicaps 0 – 20, medal, white tees, 18 holes  
Boys, handicaps 21 – 36, Stableford, yellow tees, 18 holes  
Girls, handicaps 0-36, medal, red tees, 18 holes  
Mixed, handicaps 37+, red tees, 12 holes  
Mixed, non-handicaps, black tees, 6 holes  
Younger players, 4 hole mini course and target chipping
2. Eligibility: For boys and girls who are under the age of 18 on the 1<sup>st</sup> January 2017.
3. Starting Times: Unless otherwise stipulated, tee times will commence at 10:00. Starting times and associated player information will be circulated via e-mail in advance of the competition date. If you prefer to receive starting times by post please provide a stamped addressed envelope.
4. Entries: Entry into the Junior Open 2017 can be made by completing the enclosed entry form and returning to The Secretary, Ashburnham Golf Club, Cliffe Terrace, Burry Port, SA16 0HN. The entry fee for this event is £10.00 or £7.50 for younger players playing the 4 hole mini course (includes competition entry and lunch after play). Please make cheques payable to Ashburnham Golf Club. Entries are accepted on a first come first served basis.
5. Parental Consent Form: Please ensure your entry form is returned with the enclosed parental consent form. Please note that we are unable to accept any entry that is not accompanied by this form.
6. Caddies: No caddies allowed. Parents, or accompanying adults can walk around with junior competitors, in both 18 and 12-hole categories, but at a distance of at least 25 metres behind them.
7. Cancellations: We regret that no refunds will be given if a cancellation is made after Friday 7<sup>th</sup> April 2017.
8. Local Rules: Applicable local rules are as printed on the scorecard provided on the day. Any additions or changes to these local rules will be notified to competitors on the day of the competition.
9. Results/prize presentation: The results /prize presentation will be presented as soon after the last card has been returned. In the event of a tie, a decision will be made on count-back.
10. Committee: This competition is organised by the Council of Ashburnham Golf Club who will rule on any disputes that may arise and their decision shall be final.
11. Distance Measuring Devices: A player may obtain distance information by using a device that is designed to measure or gauge distance only.





ASHBURNHAM GOLF CLUB  
CLIFFE TERRACE  
BURRY PORT  
CARMARTHENSHIRE  
SA16 0HN

TEL: 01554 832269  
FAX: 01554 836974  
E-MAIL: [admin@ashburnhamgolfclub.co.uk](mailto:admin@ashburnhamgolfclub.co.uk)  
[www.ashburnhamgolfclub.co.uk](http://www.ashburnhamgolfclub.co.uk)

## Junior Profile and parental Consent Form – Ashburnham Golf Club

The safety and welfare of juniors in our care is paramount, and it is therefore important that we are aware of any illness, medical condition and other relevant health details so that their best interests are addressed.

Please complete this form with our assurance that the information will be treated as confidential.

It is the responsibility of the junior and their parent to notify Ashburnham Golf Club if any of the details change at any time.

I.....  
(Parent/Guardian name) confirm that my child named below has my permission to compete in this event and to be on the premises of Ashburnham Golf Club.

### CONTACT DETAILS :

Competitor's name (please print):

Emergency contact name and telephone number (on day of event):

### DISABILITY/MEDICAL INFORMATION

Do you consider your child to have a disability, or a medical condition? (Please tick)

Physical	<input type="checkbox"/>
Learning Sensory	<input type="checkbox"/>
Wheelchair user	<input type="checkbox"/>
Prefer not to identify	<input type="checkbox"/>
Other	<input type="checkbox"/>

Please indicate below any health related matters or anything else we should know about, eg asthma/allergies. Any information given will be treated in the strictest of confidence. However, please be aware that this information will be passed onto the medical emergency services should the need arise:-

Additional information (if required):

Medical Conditions:

Name of competitor's Doctor/GP:

Doctor's/GP's practice telephone number:

I, ..... being the parent/guardian or the above-named child, hereby give permission for any person having responsibility for the Ashburnham Golf Club's Junior Open Day to give the immediately 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/ward's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

Signed..... Parent/Guardian

Date.....