

‘Lineage’, Lascot Hill, Wedmore, Somerset BS28 4QT

Tel: 01934 712222 Email: office@wedmoregolfclub.com

**PGA Trophy Entry Form 2019**

**Competition: Individual (Men’s & Ladies) Date: Monday 26th August 2019**

**Entry Fee: £18 Visitors £8 Members**

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| --- | --- | --- | --- | --- |
| **Title** | **Name & CDH ID Number** | **H’cap** | **Home Club** | **Pref.**  **Tee-time** |
|  |  |  |  |  |

I enclose a cheque for the total of £ ……… made out to Isle of Wedmore Golf Club Limited

**(No refund available 14 days prior to the event)**

Contact Address …………………………………………….

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Post Code …………………………………………….

Contact Tel. No. …………………………………

Email: …………………………………

**Active Handicap Certificates will be required on the day.**

**Please quote your CDH IDs on the entry form.**

**One entry form per person required**

**Confirmation of your application and Tee-times will be emailed to you.**

**If you have not supplied an email address, please enclose a S.A.E with your entry form.**

**Please send your entry form and payment to:**

**Isle of Wedmore Golf Club Limited**

**Tel: 01934 712452 Email: proshop@wedmoregolfclub.com**