

Sight Category:

## **BLIND GOLF AUSTRALIA**

www.blindgolf.com.au
ABN: 32 336 240 354

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# 2017 ISPS HANDA AUSTRALIAN BLIND GOLF CHAMPIONSHIP & 2017 NSW BLIND GOLF OPEN CHAMPIONSHIP

| 2017 NSW BLIND GOLF OPEN CHAMPIONSHIP |  |   |  |  |  |
|---------------------------------------|--|---|--|--|--|
|                                       | I  | BGA Entry Form  |  |  |  |
|                                       | Event: 2017 ISPS Handa Australian Blind Golf Championship and the NSW Blind Golf Open Championship |   |  |  |  |
|                                       | Date:  | October 5 <sup>th</sup> - October 9 <sup>th</sup> 2017  |  |  |  |
|                                       | Venue:   | Royal Sydney Golf Club [Rose Bay] / Bankstown Golf Club |  |  |  |
|                                       | City:  | Sydney Australia  |  |  |  |
|                                       | Closing Date:  | 31 July 2017  |  |  |  |
| Pla                                   | yer Information  |   |  |  |  |
|                                       | Player Name:   |   |  |  |  |
|                                       | Address:   |   |  |  |  |
|                                       | City, State:   |   |  |  |  |
|                                       | Zip/ Postal Code:  |   |  |  |  |
|                                       | Country:   |   |  |  |  |
|                                       | Home Telephone Num   | ber:  |  |  |  |
|                                       | Mobile/Cell Number:  |   |  |  |  |
|                                       | E-Mail:  |   |  |  |  |
|                                       | Companion/ Coach/Gu  | ide Name:   |  |  |  |
|                                       | E-Mail:  |   |  |  |  |
| Sig                                   | nt Category and Hand   | <u>icap</u>   |  |  |  |
|                                       | Current IBGA Handica   | p: [ ]  |  |  |  |
|                                       | [Note: Players in thi  | is tournament must have an IBGA Handicap]               |  |  |  |
|                                       | Please place an Y befo   | ore the appropriate Sight Category                      |  |  |  |

] B1

] B2 [ ] B3

### **Competition Entry**

| I wish to enter:  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Both the Australian Open and the NSW Open: Total Entry Fee AU\$380.00                       |  |  |  |  |  |  |  |
| OR  |  |  |  |  |  |  |  |
| The NSW Open only, Entry Fee AU\$180.00   |  |  |  |  |  |  |  |
| The Australian Open only, Entry Fee AU\$200.00  |  |  |  |  |  |  |  |
| Do you require a motorized cart/buggy (medical certificate required for first preferences): |  |  |  |  |  |  |  |
| [ ] The NSW Open [ ] YES [ ] NO (AU\$60.00 for 2 days)                                      |  |  |  |  |  |  |  |
| The Australian Open [ ] YES [ ] NO  |  |  |  |  |  |  |  |
| Do you require a guide/caddy: [] YES [] NO  |  |  |  |  |  |  |  |
| ACCOMMODATION:  |  |  |  |  |  |  |  |
| I/we will be requiring accommodation at The Bankstown Travelodge from 4 - 10 October        |  |  |  |  |  |  |  |
| If no, please specify staying elsewhere or different dates:                                 |  |  |  |  |  |  |  |
| From [ To   |  |  |  |  |  |  |  |
| PLEASE NOTIFY US AS SOON AS POSSIBLE IF YOU MUST CANCEL!                                    |  |  |  |  |  |  |  |
| TRANSPORTATION:   |  |  |  |  |  |  |  |
| I will provide my own transportation [ ] <b>yes</b>   |  |  |  |  |  |  |  |
| I am interested in transportation being provided: [] <b>yes</b>                             |  |  |  |  |  |  |  |
| I accept the conditions of this entry as set forth in the information letter provided.      |  |  |  |  |  |  |  |
| Signature:  |  |  |  |  |  |  |  |
| Date:   |  |  |  |  |  |  |  |

#### **Entry Form with fees must be returned to:**

Graham Coulton 1/73 Wentworth Avenue, Wentworthville, NSW, Australia, 2145

Or by email to graham coulton@bigpond.com

#### No later than 31 July 2017

#### **Electronic payment can also be made to:**

Account Name: Vision Impaired Golfers Society

Bank Name: Westpac Branch Address: Ashfield

258 Liverpool Road NSW 2131

BSB: 032-269 Account number: 11-8446

#### **Details for payment from outside of Australia are:**

| Beneficiary name | Vision Impaired Golfers Society  |  |
|------------------|--|--|
| Complete Address | 16 Baddeley Street PADSTOW NSW 2211  |  |
| Bank's Name      | Westpac Banking Company ASHFIELD NSW AUSTRALIA                                     |  |
| IBAN             | Australia does not operate with this system. Please refer to SWIFT Details         |  |
| Account Number   | 032-269 (BSB – Bank, State, Branch Number)<br>118446 (Account Number) – See note 1 |  |
| Swift / BIC      | WPACAU2S   |  |

Note 1 - To complete a transaction from overseas, the Swift Account and Bank Account (BSB and Account Number) details will need to be provided to the originating bank. The order in which the bank places these details during transaction preparation does vary.

Note 2 – Each transaction that hits our account will incur a flat fee \$? (transaction fee, conversion fee). To keep these costs down, we request that participants could please minimize transactions as much as possible.

Please notify Graham Coulton when monies have been transferred.

Email: graham coulton@bigpond.com

If you do pay the money direct to the bank, please make sure it is shown on your entry form.

| Entry fee - NSW Open:                               | AU\$180.00 | AU\$ [ | ] |  |  |  |  |  |
|---|------------|--------|---|--|--|--|--|--|
| Motorized cart, NSW Open - 2 days:                  | AU\$60.00  | AU\$ [ | ] |  |  |  |  |  |
| Accommodation, NSW Open - 3 nights (4 - 7 October): |            |        |   |  |  |  |  |  |
| AU\$381.00 or AU\$495.0                             | AU\$ [     | ]      |   |  |  |  |  |  |
| Entry fee - Australian Open:                        | AU\$200.00 | AU\$ [ | ] |  |  |  |  |  |
|   | TOTAL      | AU\$ [ | ] |  |  |  |  |  |
| If paid direct to bank:                             | Date:      |        |   |  |  |  |  |  |
|   | Amount:    | AU\$ [ | ] |  |  |  |  |  |
| Signature:  |            |        |   |  |  |  |  |  |
| Date:   |            |        |   |  |  |  |  |  |

Return this form before July 31st 2017

#### \*\* Form Return Options

I/we include payments as follows:

**PDF Version:** can be printed, filled in manually and *mailed* or scanned and *emailed* 

WORD Version: can be saved as a file, filled in and returned by email attachment