

IBGA Initial Entry Form

Event: ISPS HANDA 3rd AUSTRIAN Blind Golf Open 2017
Date: September 17th - 21st
Venue: GC Wien-Suessenbrunn
City: Weingartenallee 22, 1220 Wien
Closing Date: 30th June 2017

Player Information

Player Name: _____
Address: _____
City, State: _____
Zip/ Postal Code: _____
Country: _____
Telephone Number: _____
Mobile/Cell Number: _____
E-Mail: _____
Companion/ Coach/Guide Name: _____
E-Mail: _____

Shirt Sizes:-

Player: S M XL XXL XXXL men's women's
Coach: S M XL XXL XXXL men's women's

Current IBGA Handicap: _____

[Note: Players in this tournament must have an IBGA Handicap]

Select Sight Category

Please place an X before the appropriate Sight Category

Sight Category: B1 B2 B3

I request a buggy at a cost of € 33 per day payable direct to the Golf Shop.

Yes No

Accommodation:

Available from arrival on afternoon of Sunday 17th September to departure on morning of Thursday 21st September on a Bed and Breakfast basis with Dinner from Monday to Thursday.

I require a **DOUBLE** [] **TWIN** [] **SINGLE** []

(NOTE: there is a supplementary charge for single rooms)

Do you or your coach have any special dietary needs? []

Please Specify: _____

PLEASE NOTIFY US AS SOON AS POSSIBLE IF YOU MUST CANCEL!

Transportation:

There will be a shuttle service organized from Vienna airport to the Sportpark Hotel, which is directly at the golf course.

I will provide my own transportation **yes** []

I am interested in transportation being provided: **yes** []

Flight Details:

Arrival Flight Number: _____

Arrival Time: _____

Departure Flight Number: _____

Departure Time: _____

I accept the conditions of entry including the possibility of being required to have an eyesight test.

Signature: _____

Date: _____

Payments for € 150,-- should be made (once your registration has been accepted) to:-

Oesterreichischer Golfverband
Maxergasse 25
1030 Wien
UniCredit Bank Austria AG
1010 Wien
IBAN: AT70 1100 0006 4363 4900
BIC: BKAUATWW

Please ensure your name is indicated on the transfer

Please send this completed form to:

Karin Becker via email: karin.becker@chello.at

Return this form before June 30th 2017