**COTTRELL RESORT SENIORS SECTION**



**SENIORS OPEN DAY – WEDNESDAY 17th JULY 2024**

**ENTRY FORM for MEMBERS & GUESTS**

**TWO SEPARATE 18 HOLE STABLEFORD QUALIFYING COMPETITIONS, EACH WITH PLACE PRIZES**

**FULL HANDICAP ALLOWANCES**

**(Handicap Index & Age Category will be verified prior to award of any prizes)**

### **Group A:- Age 55 – 69 years will play the MACKINTOSH COURSE off Yellow Tees**

### **Group B:- Age 70 years and over will play the BUTTON COURSE off Yellow Tees**

### **(Age to be determined at 17th July 2024)**

**Entry Fee: £10 per member, £23 per guest.**

**Please return entry forms by email if possible, to** [cpseniors**open**@gmail.com](mailto:cpseniorsopen@gmail.com)**. Payment of the entry fee may be made by BACS bank transfer (Sort Code 52-30-03, Account Number 30011213, Reference “OPEN NAME INITIAL” e.g. “OPEN JESSOP R”). Otherwise, please return the entry form together with a cheque made payable to “Cottrell Park Seniors Section” and hand into Reception for the Seniors Pigeon Hole.**

Please indicate your preferred tee time which we will endeavour to accommodate. For further information regarding available tee times at the date of your application please contact Bob Jessop, the Open Day Coordinator, at the above email address.

***Please Note: Buggies for the day are subject to availability and must be pre-booked using this Entry Form when applying for a tee time.***

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| **Name of Player** | **Home Golf Club** | **Group (A or B)** | **CDH No.** | **Preferred Tee Time** | **Buggy Yes/No** |
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Entry fees are only refundable if the Open Day is cancelled and not re-arranged.

NAME: .................................................................................... AMOUNT ENCLOSED/PAID BY BACS: ……………………..

ADDRESS: ...................................................................................................................................................................................

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EMAIL ADDRESS: ............................................................................................... TEL: ........................................