



SINGAPORE GOLF ASSOCIATION

28th Singapore Ladies Amateur Open Golf Championship 2017
Laguna National Golf & Country Club, 21st to 23rd March 2017

Closing Date: 28th February 2017

Attn: Ms. Goh Kui Hwa
Honorary Secretary
HP: 96668987

Singapore Ladies Golf Association
c/o Laguna National Golf and Country Club
11 Laguna Golf Green,
Singapore 488047

ENTRY FORM (OVERSEAS PARTICIPANTS)

INDIVIDUAL EVENT

Ms /Mrs: _____ Country: _____

Email: _____ Mobile No: _____

USGA Handicap Index: _____

Golf Club/ Association: _____

Date of Birth: _____

Select one Division

OPEN DIVISION (no age restriction) HI 8.0 & below	Mid-Amateur DIVISION 1 (age 35 and above) HI 9.9 & under	Mid-Amateur DIVISION 2 (age 35 and above) HI 10.0 to 14.9

Mid-Amateur division is open to golfers who are 35 years & above on 1st Jan 2016.

Mid-Amateur division players are not eligible to win the top 3 Overall Gross prizes.



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Mobile No: _____ Email: _____

In Case of Emergency, Contact: _____

PAYMENT DETAILS

Payment by Bank Transfer to:

Beneficiary's Name	:	Singapore Golf Association
Address of Beneficiary's Name	:	249 Sembawang Road Singapore 758352
Account No	:	001-058282-8
Beneficiary's Bank	:	DBS Bank
Branch	:	12 Marina Boulevard, DBS Asia Central Marina Bay Financial Centre Tower 3, Singapore 018982
Bank Code	:	7171
Branch Code	:	001

"All bank charges to be borne by participants' should they wire over the entry fee.

Transaction No: _____ Date of Transfer: _____

OR

I enclose Banker's Draft/Cashier's Order No: _____

for the amount of US\$280.00 (Payable to SINGAPORE GOLF ASSOCIATION)

Signature of Player

Date

I certify that the USGA handicap index of the participant is correct.

Name of Club Certified by: Golf Manager (Name/Signature)

Ms. Goh Kui Hwa, Honorary Secretary
c/o Laguna National Golf and Country Club
11 Laguna Golf Green, Singapore 488047
Email: secretary@slga.org.sg H/P: 96668987



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TEAM EVENT FOR TEAM CAPTAINS ONLY

- 1) Team Event – Entries are to be submitted by the **TEAM CAPTAINS ONLY**.
- 2) Entry Fees: S\$45.00 per team (Pay at Practice Round)
- 3) Indicate Division of competition (All team members must be in the same division)

Name of Team: _____

Team Captain’s Golf Club/Association Address:

Office Tel: _____ Mobile Phone: _____

Email: _____ Fax Number: _____

Team Players’ Information:

Team Captain: _____ USGA H.I. _____

2nd Player: _____ USGA H.I. _____

3rd Player: _____ USGA H.I. _____

Division of competition: **OPEN** or **Mid-Amateur**

Name/Signature
