



Swanston Junior Open Thursday 10th July 2008

SPONSORED BY

SWANSTON GOLF LIMITED

www.swanstongolf.co.uk

CONDITIONS

1. The Competition will be open to any boys under age of 18 on 1st January 2008 who holds a current handicap of 28 or less and is an amateur.
2. The Entry Fee is £5.00. All cheques should be made payable to **SWANSTON GOLF LTD.**
3. Entries, on Official Entry Forms along with Entry Fee, must be in the hands of the Director of Golf, Swanston Golf Ltd, no later than Monday 7th August 2008. **Tee times will only be issued when entry fee is paid in full.** Entries will close earlier if the full number is reached.
4. The starting sheet will be posted on our website. If you wish to be notified of your start time by post please include a S.A.E. with your entry. Otherwise start times can be obtained by contacting the Golf Shop on 0131 445 2239 from Tuesday 8th August onwards.
5. The Competition will be played over ONE Medal Round, in accordance with the Rules of Golf and Local Rules applicable to Swanston Golf Ltd.
6. Reception will commence at 7:00am with the first tee off at 7:30am. Players are asked to indicate their preferred starting time and every effort will be made to accommodate them. In the event of duplication, times will be allocated in order of receipt of entry form and fee.

PRESENTATIONS

7. The prize giving will be held in the clubhouse and will commence thirty minutes after the last group returns their scores. Winners should contact the organisers if they are unable to attend the presentation of prizes.
8. Entry Forms should be sent to:
Stewart Snedden
Director of Golf
Swanston Golf Ltd
111 Swanston Road
Edinburgh EH10 7DS

All competitors must familiarise themselves with the H&S Policy at Swanston Golf Ltd (the Policy is posted on all notice boards within the complex).

SWANSTON JUNIOR OPEN ENTRY FORM

Please enter me for the Swanston Junior Open to be played on Thursday 10th July 2008.

I agree to accept the conditions stated above. Entry Fee of £5.00 is enclosed.

NAME

ADDRESS

CLUB

TELEPHONE No HANDICAP (Max.28)

SIGNATURE Preferred Starting Time:

I certify that the handicap stated above is correct. Signed (Comp/H'Cap Secretary)

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