



**Aberdour Golf Club  
Open Competition Entry Form**

THE CLUB MANAGER  
ABERDOUR GOLF CLUB  
SEASIDE PLACE,  
ABERDOUR  
FIFE KY3 OTX

Date \_\_\_\_\_

Please accept my entry for the \_\_\_\_\_ on \_\_\_\_\_

My Handicap is \_\_\_\_\_ at \_\_\_\_\_ Golf Club

The S.S.S is \_\_\_\_\_ If a Senior/Junior, please give your date of birth \_\_\_\_\_

Preferred starting time is \_\_\_\_\_

I/we enclose £\_\_\_\_\_ to cover my/our entry

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel No \_\_\_\_\_

*My handicap certificate, if required, will be shown on the day*

Signed \_\_\_\_\_

*If applicable please complete the following:*

My partner's name is \_\_\_\_\_ with a

Handicap of \_\_\_\_\_ at \_\_\_\_\_ Golf Club