

The 25th Pro-Amateur Club Championship of the Carolinas Golf Association

**April 23, 2001
Spring Valley CC
Columbia, SC**



**Opening date: March 19
Closing date: April 16
Entry Fee: \$100 per team**

ELIGIBILITY

Entry is open to any team comprised of a male golf professional employed by a CGA Member Club and a male amateur golfer who is a member in good standing of the same CGA Member Club. The amateur partner must be a legal resident of one of the Carolinas and have a current CGA handicap index. Entries are subject to rejection at any time, including during the event, by the CGA or the host club. The reason for rejection may include unbecoming conduct. **Only one team entry allowed per member club.**

RULES

USGA Rules of Golf govern play. Local rules will be distributed at the starter's table. The Carolinas Golf Association reserves the right to alter the conditions or schedules as stated, including alteration of the stipulated round(s) at any time during the championship. *Note: During the stipulated round, use of cell phones, pagers, beepers and the like will NOT be allowed.* Format is four-ball stroke play with no handicap.

PRIZES

The purse and prize distribution is determined by the number of entries. Amateurs receive merchandise certificates. The championship team professional receives \$750 and his amateur partner a \$500 gift certificate. The permanent trophy will be displayed at the winning team's club until the next championship. Total purse will be \$6000 based on a full field. Professionals and amateurs will share equally in the prize distribution except for first place, as stated above.

ENTRIES

Each team must complete an official entry form. No entry will be accepted prior to the opening date. Entries then will be accumulated for seven days, after which the final field will be selected by the amateur's handicap index and CGA championship record. Entries will be accepted until 5 p.m. of the closing date. The CGA is not responsible for errors or delays by any mail courier. Confirmation of acceptance and lodging information will be sent to the golf professional listed on this form when the field is filled or after entries close.

Entries must be returned to the Carolinas Golf Association, PO Box 319, West End, NC 27376. Fax, telephone, late or incomplete entries will not be accepted. The entry fee must be paid by each team and must accompany this form. Only one entry per check. Daily cart fees are not included in the entry fee.

Make check payable to the Carolinas Golf Association. A player whose check is returned for insufficient funds may be disqualified indefinitely from CGA competitions. Refunds are not made after entries close except in the case of a verified player illness or death in the family. Refunds are not made for any reason on or after April 20.

Schedule of Play at Spring Valley Country Club

Sunday, April 22	Course open for practice.
Monday, April 23	Four-Ball stroke play (18 holes).

Pairings and starting times will be posted on the CGA web site (www.thecga.org) and at the club the day before the championship. Special requests for starting times or pairings are not granted.

CGA: 910-673-1000

Spring Valley Country Club: 803-788-3084

Detach, sign and mail the entry form with your fee to Carolinas Golf Association, PO Box 319, West End, NC 27376. Entries received before the opening date will be returned. Entry fee is \$100 per team. Incomplete or illegible forms will not be accepted. Confirmation of acceptance will be mailed only to the first name on the entry form. **Keep this bottom portion for your records.** It includes important phone numbers.

For office use only-1

Date Rec _____

Entry # _____

PC/Ltr Sent _____

WD CD Y N Chk# _____

Application for Entry
2001 Pro-Amateur Club Championship
of the Carolinas Golf Association

Name of Club _____

Name of professional _____ IG# _____
Amateur name on CGA Handicap card _____ (may not be available at all clubs)

Address _____ Address _____

City, State, Zip Code _____ City, State, Zip Code _____

(_____) _____ (_____) _____ (_____) _____ (_____) _____
Work phone Home phone Work phone Home phone

Email address _____

Age as of 4/23/01 _____ CGA Handicap Index _____ As of 3/19/01 _____

If you are not receiving "Carolina Fairways" magazine, please check here: _____

We have read all rules pertaining to this championship. We have completed this entry form and enclosed the entry fee. We agree to abide by all decisions of the CGA Championship Committee, the CGA Tournament Manual (located at www.thecga.org) and the conditions of play pertaining to this championship. We are aware that disqualification is the penalty for our failure to do so. We release the Carolinas Golf Association, its committee members, officers, and staff from any and all liability for any event or consequence relating to entry or participation in this event.

Signatures _____ & _____

Entry fee is \$100 per team

