

The 24th Women's Four-Ball Championship of the Carolinas Golf Association

**August 15-16, 2001
The Windermere Club
Blythewood, SC**



**Opening date: July 2
Closing date: Aug. 6
Entry Fee: \$80 per team**

ELIGIBILITY

Entry is open to any female (at birth) amateur golfer who is a legal resident of one of the Carolinas, is a member in good standing of a club which is a member of the Carolinas Golf Association and has 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.

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.*

PRIZES

The championship team will receive merchandise and trophies. The field will be divided into flights by score after the first round. Flight breaks will be determined by team handicap index totals with lowest handicap being placed in the lower flight. The championship flight and first flight will play from the championship tees in the second round; all other flights will play from shorter tees and will not compete for the overall title. Prizes will be awarded to the low scorers in each flight. Ties will be split except for flight winners, in which case ties will be resolved using a scorecard playoff. A tie for the overall championship will be resolved using an on-course playoff.

ENTRIES

Each team must complete an official entry form. No entry will be accepted prior to the opening date. Entries will be accepted until 5 p.m. of the closing date. The CGA is not responsible for errors and/or delays by any mail courier. Confirmation of acceptance and lodging information will be sent to the **first** player listed on this form when the field is filled or after entries close.

Entries must be returned to the Carolinas Golf Association, P.O. 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. Entry fee does not include cart fees. 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 August 10.

Schedule of Play at The Windermere Club

Tuesday, August 14	Course open for practice.
Wednesday, August 15	First round of stroke play. (Tee Times)
Thursday, August 16	Final round of stroke play. (Shotgun) Championship and first flight will play from championship tees second day.

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. The host club and the Carolinas Golf Association invite competitors to an awards luncheon following play on the second day.

CGA: 910-673-1000

The Windermere Club: 803-786-7888

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 \$80 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-I

Date Rec _____

Entry # _____

PC/Ltr Sent _____

WD CD Y N Chk# _____

Application for Entry

2001 Women's Four-Ball Championship of the Carolinas Golf Association

_____ IGN # _____ IGN # _____
Your name on CGA handicap card (may not be available at all clubs) Your name on CGA handicap card (may not be available at all clubs)

_____ If your address has _____ If the address has
changed check here: _____ changed check here: _____

Address _____ Address _____

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

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

_____ Email address _____ Email address _____

CGA Handicap Index _____ Age as of 8/15/01 _____ CGA Handicap Index _____ Age as of 8/15/01 _____
(Age is requested for pairing purposes)

CGA Club _____ CGA Club _____

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

We are members in good standing with the club(s) listed above. 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 disqualification is the penalty for failure to do so. I 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 \$80 per team

