



# Carolinan Golf Association Mixed Team Two-Day Tournament

## Official Entry Form

Brunswick Plantation Golf Links, Calabash, NC

Saturday, September 3 & Sunday, September 4, 2005

Entry Fee: \$100 per team (lunch included) Open Date: July 11 - Close Date: August 17

### Eligibility

Entry is open to any team comprised of a male and a female (at birth) golfer who are members in good standing of a club which is a member of the Carolinas Golf Association and have current (within 90 days) CGA handicap indexes. 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 are distributed at the site. The Carolinas Golf Association reserves the right to alter the conditions or schedules as stated. The CGA official-in-charge reserves the right to withhold prizes for competitors whose handicaps are considered unrealistic or who have participated in a disproportionate share of CGA prize distributions.

### Format

The tournament will be contested at 36 holes of four-ball stroke play. Teams are pre-flighted by the total team handicap index. Team handicap index is computed by adding 2/3 of the lower handicap index to 1/3 of the higher handicap index. Lunch will be served to competitors each day. Mandatory cart fees are not included in the entry fee and must be paid prior to each round.

### Entries

**Online entry applications may be completed at [www.carolinangolf.org](http://www.carolinangolf.org).** Each team must complete an official entry form. No entry is accepted prior to the opening date. Entries are accepted until 5 p.m. of the closing date. The CGA is not responsible for errors or delays made by any mail or delivery courier. Fax, e-mail, telephone, late or incomplete entries are not accepted. Confirmation of acceptance is mailed to the first player on the entry form below. Pairings are available to the host club and on the internet at [www.carolinangolf.org](http://www.carolinangolf.org). Entries must be returned to the **Carolinan Golf Association, PO Box 319, West End, NC 27376**. The entry fee must be paid by each team and must accompany this form. Only one entry per check. Make check payable to Carolinas Golf Association. A check returned for insufficient funds may cause disqualification from future CGA competitions. **A \$20 administrative fee is deducted from all refunds.** Refunds are not made for any reason after entries close.

### Application for Entry

#### Carolinan Mixed Team Two-Day Tournament

Entry Fee is \$100 per team + Carts (entry fee does not include carts)

Please print. **Illegible or incomplete forms will be returned.**

Date Rec. _____	
For CGA office use only	
Entry # _____	
PC/LTR Sent _____	
WD	CD
Y	N
Chk # _____	

Applicant's Name \_\_\_\_\_

New Address

Address \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

County \_\_\_\_\_

E-Mail (tournament information is sent to this address) \_\_\_\_\_

(\_\_\_\_\_) \_\_\_\_\_  
Home Phone

(\_\_\_\_\_) \_\_\_\_\_  
Work Phone

(\_\_\_\_\_) \_\_\_\_\_  
Mobile Phone

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Age

CGA Member Club \_\_\_\_\_

CGA Handicap Index \_\_\_\_\_

Partner's Name \_\_\_\_\_

New Address

Address \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

County \_\_\_\_\_

E-Mail \_\_\_\_\_

(\_\_\_\_\_) \_\_\_\_\_  
Home Phone

(\_\_\_\_\_) \_\_\_\_\_  
Work Phone

(\_\_\_\_\_) \_\_\_\_\_  
Mobile Phone

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Age

CGA Member Club \_\_\_\_\_

CGA Handicap Index \_\_\_\_\_

Signature \_\_\_\_\_

& Signature \_\_\_\_\_

Mail entry form with \$100 entry fee to: Carolinas Golf Association, PO Box 319, West End, NC 27376

Phone: 910-673-1000

E-mail: [info@carolinangolf.org](mailto:info@carolinangolf.org)

Web Site: [www.carolinangolf.org](http://www.carolinangolf.org)

2005