



"CHARITY GOLF DAY"

Capricorn Country Club
131 Richardson Road, North Rockhampton

Friday 11 April 2014

Tee off 12.00pm – Shotgun Start
4-A-SIDE AMBROSE

\$140.00 team of four

MAJOR PRIZE: "HOLE IN ONE" ON HOLE 15
WINS A BRAND NEW CAR

MULTI-DRAW RAFFLE - GREAT PRIZES TO BE WON
ENTRANCE FEE INCLUDES LUNCH

- | | |
|-------------------------|-------------------------------|
| 1. BEST GROSS | 5. LONG DRIVES – MEN & LADIES |
| 2. RUNNER-UP BEST GROSS | 6. NEAREST THE PIN |
| 3. BEST NET | 7. NET RUN DOWN |
| 4. RUNNER-UP BEST NET | |

Supporting
Darumbal Youth Services and Roseberry Community Services

MAJOR SPONSORS



CONDITIONS OF PLAY

1. Open to members of all golf clubs affiliated with Q.G.U. and W.G.Q. & social golfers.
2. Australian handicaps apply (Social Golfers – Men 24, Ladies 36).
3. Competition to be played under Rules of Golf and conditions laid down by Capricorn Country Club.
4. No competitor can win more than one trophy.
5. The committee reserves the right to reject any entry or adjust any handicap without assigning any reason therefore.
6. Entries close Friday 4 April 2014.
7. Dress Code and Code of Behaviour applies.

For more information contact CTC on 4922 2008

MEDIA CONSENT & RELEASE FORM

Name, image, sound or other recording of you, individually or as part of a group, may be captured in the course of this activity. These images, sound or other recording may be retained and utilised by CTC. If you do not consent please indicate below and instructions will be provided at registration.

I consent

I do not consent

Signed: _____ Date: ____ / ____ / 14

NOMINATION FORM

ENTRANCE FEE - \$140.00 team of four

Please Note: Teams must be paid for in full, if a team member is not available on the day the price for the individual remains as a donation.

REGISTRATION 11.00 am

TEE OFF TIME 12.00 pm (Shotgun Start)

TEAM NAME:		
PLAYER NAME	CLUB/SOCIAL	HANDICAP
1.		
2.		
3.		
4.		

This becomes a tax invoice upon payment:

TAX INVOICE

Capricornia Training Company Ltd. ABN 13 419 019 806

Date: / / 2014

Name: Company:

Address:

Ph: Fax: Email:

Amount (inc GST): \$

Please return nomination form to CTC, 38 Armstrong Street, North Rockhampton

Full payment by Friday 4 April 2014

Fax No. 4922 2049

Email: rsvp@ctcltd.com.au