

Northern California Golf Association



2018

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OFFICIAL ENTRY

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51st ANNUAL FOUR-BALL NET CHAMPIONSHIP

(TWO - PERSON BETTER BALL)

POPPY HILLS GC

Tournament Schedule and Deadlines

Team(s) Entry Deadline April 29, 2018
Sectional Qualifying May 24, 2018
Championship Proper June 18-19, 2018

Qualifying: \$270 Per Team
48 Teams Advance to Championship Proper
Championship: No Additional Fee

Entry application and appropriate fee must reach Northern California Golf Association, Tournaments, 3200 Lopez Road, Pebble Beach, CA 93953.

INCOMPLETE ENTRIES WILL NOT BE ACCEPTED

TOURNAMENT CHAIRMAN SECTION MUST BE COMPLETED

ENTER YOUR QUALIFYING TEAM ON THE REVERSE SIDE

FOUR-BALL NET CHAMPIONSHIP – 3158.1052

QUALIFYING ENTRY FEE: \$270.00 \$ 270.00/TEAM
**NCGA FOUNDATION DONATION -OPTIONAL \$
TOTAL AMOUNT ENCLOSED: \$

** Thank you for your support. Donations are tax deductible.

PLEASE MARK TOP THREE QUALIFYING SITE CHOICES IN ORDER OF PREFERENCE: (#1, #2, #3)

- Castle Oaks GC Coyote Creek GC Del Monte GC
Diablo Creek GC Haggin Oaks GC Paso Robles GC
Peach Tree GC Peacock Gap GC Poppy Ridge GC
Rancho Solano GC Reserve at Spanos Park Sunnyside CC

CLUB # CLUB NAME: (See back of the Bluebook)

OF TEAMS YOUR CLUB IS SENDING THIS IS ENTRY # OF

TEAM ALLOCATION: NUMBER OF TEAM(S) ALLOWED BASED ON NCGA CLUB MEMBERSHIP AS OF JANUARY 15, 2018.

20 – 150 active golfing members 1 team
151 – 350 active golfing members 2 teams
351+ active golfing members 3 teams

PLAYER #1 NCGA Member # CURRENT HANDICAP INDEX:

NAME: First PLEASE PRINT Last DAY PHONE: ()

ADDRESS: Street City Zip Qualifying site determined by this zip code if not marked above

Male / Female DATE OF BIRTH: - - AGE: E-MAIL: (Please circle)

PLAYER #2 NCGA Member # CURRENT HANDICAP INDEX:

NAME: First PLEASE PRINT Last DAY PHONE: ()

ADDRESS: Street City Zip

Male / Female DATE OF BIRTH: - - AGE: E-MAIL: (Please circle)

ATTENTION TOURNAMENT CHAIRMAN :

ENTRY IS ONLY OPEN TO THOSE CLUBS THAT HAVE MET THE REQUIREMENTS OF THE NCGA HANDICAP CERTIFICATION PROGRAM INCLUDING THE SUCCESSFUL COMPLETION OF AN NCGA HANDICAP CERTIFICATION SEMINAR.

All club qualifiers must be held prior to the tournament close date. In order for your club to participate in this event all sections of this entry must be complete. If not, it will be returned without action.

The players have read and agree to observe all regulations and conditions as stated in the entry jacket and "Tournament Policies." These can be found on the NCGA Website at www.ncga.org.

Tournament Chairman (or Club Official) Name (Please Print) Title

Address City Zip

() E-mail

Day Phone

HOW MANY of your members TRIED TO QUALIFY AT YOUR CLUB? (enter this information on entry #1 only)

ENCLOSED IS MY CHECK PAYABLE TO THE NCGA OR PLEASE BILL MY CREDIT CARD:

American Express Discover MasterCard Visa Card #

Signature (Required) Exp. Date / Security Code:

** Thank you for your support. Donations are Tax Deductible