



Hospice Klang Charity Golf Tournament 2010
at
Kelab Golf Sultan Abdul Aziz Shah
Sunday, May 30th., 2010

ENTRY FORM

Date: _____

Name: Mr/Ms _____

Address: _____

Tel: H O H/P _____

My Home Club: _____

Category Of Competitors:

Please Tick	Category	Age (as of Jan 1st., 2010)
<input type="checkbox"/>	Regular	Below 55 yr
<input type="checkbox"/>	Senior	55 yr & above
<input type="checkbox"/>		

Scoring format: Stableforth system 36

PLEASE ATTACH YOUR LATEST COPY OF PROOF OF HANDICAP

I hereby agree to abide by the rules set by the Organising Committee

Enclosed herewith payment of **RM350** / KGSAAS member **RM300**

CASH

CHEQUE, No. _____

*crossed cheque, made payable to 'Pertubuhan Hospis Klang' or 'Hospice Klang'

Thank you.

Yours truly,

Name & Signature of competitor

***I certify that all details given above are correct**

Please Tick	T-Shirt Size
<input type="checkbox"/>	S
<input type="checkbox"/>	M
<input type="checkbox"/>	XL
<input type="checkbox"/>	XXL

Note: Please return completed entry form together with full payment on or before May 15, 2010 to:

The Secretary
Organising Committee– Golf Tournament 2010
Hospice Klang
82, Jalan Sri Sarawak 4,
Taman Sri Andalas,
41200 Klang, Selangor