

THORNHILL GOLF CLUB

**MARCHBANK TROPHY**

WEDNESDAY 11<sup>TH</sup> JULY 2012

**PLEASE PRINT DETAILS**

Gent's Name:	Partners Name	
Address:	Telephone Number: (Essential)	
Player 1's Home Golf Club:	Handicap:	C D H Id Number:
Player 2's Home Golf Club:	Handicap:	C D H Id Number:
Club Official's Signature	Preferred starting time: (This is not always possible)	

We accept the Conditions for this competition .....Signature

**I ENCLOSE THE ENTRY FEE OF £12.00  
THIS MUST BE PAID WITH ENTRY AND IS NON REFUNDABLE AFTER THE DRAW HAS BEEN MADE**

PLEASE RETURN THIS FORM TO: (PLEASE MARK ENVELOPE "MARCHBANK TROPHY")  
MATCH SECRETARY, THORNHILL GOLF CLUB, BLACKNEST, THORNHILL, DUMFRIESSHIRE, DG3 5DW  
BY FRIDAY 22<sup>ND</sup> JUNE 2012