



OLD FOLD MANOR
GOLF CLUB
 FOUNDED 1910

OLD FOLD MANOR JUNIOR OPEN

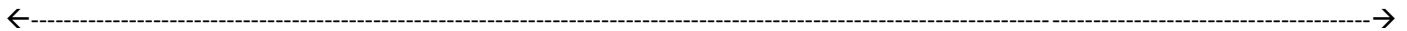
HERTS BOYS ORDER OF MERIT QUALIFIER

WEDNESDAY 25TH JULY (from 10.00am)

18 HOLE HANDICAP MEDAL

(CADDIES NOT ALLOWED)

1. This competition is open to junior golfers under the age of 18 years on 1st January 2018.
2. The competition will be played under the Rules of Golf as administered by the Royal & Ancient Golf Club of St Andrews, in conjunction with the Local Rules of Old Fold Manor GC.
3. Maximum handicaps (active handicaps only): **Boys/Girls 36**
4. Handicap Allowance: **Full**; Handicap certificates may be requested.
5. Tee times: From **10.00am, 2 tee start. Boys: White Tees Girls: Red Tees**. Start Sheets will be sent out by e mail on Friday 20th July 2018 to those who have provided an e mail address, by post to those who have not.
6. Men's scorecard to be used by all competitors; Girls will receive 2 Standard Scratch adjustment shots.
7. Distance measuring devices are permitted if they measure distance only. R & A Rule 14-3 applies.
8. Entry is limited to 48 competitors. Old Fold Manor Golf Club members **are** permitted to enter.
9. **Closing date for entries will be Wednesday 18th July 2018.**
10. **Entry fee: £25 per competitor** which includes meal and prizes. All entry forms must be accompanied by the entry fee and **Parental Consent Forms** (enclosed).
11. The number of prizes and their value will be dictated by the number of entrants, but as a minimum there will be prizes for 1st, 2nd and 3rd gross and 1st, 2nd and 3rd handicap. No competitor may win more than 1 prize. All ties will be decided by countback (best back 9, 6, 3,1).
12. The decisions of Old Fold Manor Golf Club Committee will be final.



OLD FOLD MANOR JUNIOR OPEN WEDNESDAY 25th JULY 2018 - ENTRY FORM

Please return, together with a cheque for £25 payable to Old Fold Manor GC, Parental Consent Forms and a SAE to:
Callum Austin, Old Fold Manor Golf Club, Hadley Green, Barnet, Herts EN5 4QN

PLEASE USE BLOCK CAPITALS

COMPETITOR

NAME: _____
 ADDRESS: _____
 E MAIL _____
 HANDICAP _____

HOME CLUB: _____
 HOME TEL NO: _____
 MOBILE NO: _____
 CONGU CDH ID No. _____

PARENTS/GUARDIANS

NAME: _____
 ADDRESS: _____
 E MAIL _____

NAME : _____
 HOME TEL NO: _____
 MOBILE NO: _____

SIGNATURES

COMPETITOR: _____
 PARENT/GUARDIAN _____

DATED: _____
 DATED: _____

****PARENTAL CONSENT FORMS ATTACHED MUST BE COMPLETED****



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PARENTAL CONSENT FORMS

JUNIOR PLAYER PROFILE

The safety and welfare of juniors whilst at Old Fold Manor Golf Club, Barnet is paramount, and it is therefore important that we are aware of any illness, medical condition and other relevant health details so that their best interests are addressed.

Please complete this form with our assurance that the information will be treated as confidential.

It is the responsibility of the junior and their parent/guardian to notify the Junior Organiser or Club Manager if any details change at any time.

Competitor's Name	
Date of Birth	
Address	
Telephone Number	
Parent/Guardian's Name	
Address <small>(if different to above)</small>	
Home Telephone Number	
Mobile Telephone Number	
Work Telephone Number	
EMERGENCY CONTACTS	
Contact 1 - Name	
Relationship to child	
Home Telephone Number	
Mobile Telephone Number	
Work Telephone Number	
Contact 2 - Name	
Relationship to child	
Home Telephone Number	
Mobile Telephone Number	
Work Telephone Number	



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JUNIOR PLAYER PROFILE (continued)

MEDICAL INFORMATION		
Child's Doctor's Name		
Doctor's Surgery Address		
Surgery Telephone Number		
MEDICAL QUESTIONNAIRE		
	YES	NO
Does your child experience any conditions requiring medical treatment and/or medication? If YES please give details, including medication, dose and frequency:		
Does your child have any allergies? If YES please give details:		
Does your child have any specific dietary requirements? If YES please give details:		
What additional needs, if any, does your child have e.g. needs help to administer planned medication, assistance with lifting or access, regular snacks?		
DISABILITY DISCRIMINATION ACT 1985		
The Disability Discrimination Act 1985 defines a disabled person as 'anyone with a physical or mental impairment, which has a substantial and long term adverse effect on his or her ability to carry out normal day to day activities'.		
Do you consider your child to have a disability?		
If YES what is the nature of the disability? (Please tick if appropriate)		
Hearing Impairment:	Learning disability:	Multiple Disabilities:
Physical Disability:	Other: (please specify)	



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DECLARATION

➤ I confirm that to the best of my knowledge that my child does not suffer from any medical condition other than those listed above
(please tick)

➤ I agree to notify the Club of any changes
(please tick)

➤ I, _____, being parent/guardian of the above named child, hereby give permission for the Old Fold Manor Golf Club's responsible person to give the immediate necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my child's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent
(please tick)

➤ The signature below denotes that my child has my permission to be on the golf club's premises
(please tick)

➤ I acknowledge that the club is not responsible for providing adult supervision for my child except when playing in the competition
(please tick)

Signed (parent/guardian) _____

Print name _____

Date: _____



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PERMISSION FOR THE USE OF PHOTOGRAPHS AND RECORDED IMAGES

This form is to be signed by the legal guardian of a child under the age of 18, together with the child. Old Fold Manor Golf Club recognises the need to ensure the welfare and safety of children in golf. As part of our commitment to ensure their safety we will not permit photographs, video images or other images of your child to be taken or used without your consent.

Old Fold Manor Golf Club will take steps to ensure that all consented images are used solely for the purposes for which they are intended i.e. the promotion and celebration of the activities of Old fold Manor Golf Club.

IF YOU BECOME AWARE THAT THESE IMAGES ARE BEING USED INAPPROPRIATELY YOU SHOULD INFORM THE GOLF CLUB'S MANAGER IMMEDIATELY

Images may be available on the Club's web-site: www.oldfoldmanor.co.uk

If at any time the parent/guardian or the child wishes the data to be removed from the web-site, 7 days' notice must be given to the Club's Manager after which the data will be removed.

PARENTAL AND CHILDREN PERMISSION FOR THE USE OF PHOTOGRAPHS AND RECORDED IMAGES

To be completed by the parent/guardian

I, _____ consent to the photographing or videoing of _____ under the stated rules and conditions and confirm that I have a legal parental responsibility for this child and am entitled to give this consent

Signature: _____ **Date:** _____

To be completed by the child

I, _____ consent to the photographing and videoing of my involvement in golf under the stated conditions.

Signature: _____ **Date:** _____