

Date:

Sunday, 5 January 2020

Now TV Presents 2020 JCKSC New Year Pairs Trophy



Tel: 2791 3372

Fax: 2792 9612

Entry Form

Venue: The Jockey Club Kau Sai Chau Public Golf Course – North Course					
Personal Details					
Player 1		Player 2			
Name:(Eng)	(Chi)	Name:		(Eng) _	(Chi)
HKID Passport	Gender: M / F	HKID	Passport		Gender: M / F
Date of Birth:	(dd/mm/yyyy)	Date of Birt	h:		(dd/mm/yyyy)
(Contact Player) Mobile:		Email:			
Important – Please read the attached information for requirements					
Player	HKGA or Other Membership No. Handicap Index				
Player 1			1511119 1 (0.		
Player 2	1. 1.	11			
Note 1: Priority will be given to pairs with lower combined handicaps. Note 2: A copy of updated handicap certificate (updated on or after 5 July 2019) must be accompanied with each entry form.					
Public Golf Course Limited. Tee times will be posted on JCKSC website, www.kscgolf.org.hk , a few days prior to the event. * Entries will be accepted at the discretion of the Jockey Club Kau Sai Chau Tournament Committee and the decision shall be final. * Under any circumstances, 50% of the entry fees will be forfeited as administration charge for any cancellation after the entries closing date. * Any cancellation on the event day, NO refund. To allow us to stay in contact with you, we may use your personal data to inform you about the updates of the tournaments hosted by our Golf Course. If you do not agree to being contacted for this purpose, please tick the box below. I do not wish to receive such information from The Jockey Club Kau Sai Chau Public Golf Course I confirm that I have read, understand and agree with the contents of the Golf Course's Privacy Policy Statement which is available at http://www.kscgolf.org.hk/document/PrivacyNotice_eng.pdf . I consent to the Golf Course using the personal data provided in this form for the purposes as stated in the Golf Course's Privacy Policy Statement. Player 1's Signature:					
Tournament			No. of Person	ns	Entry Fee
Now TV Presents 2020 JCKSC No	ew Year Pairs Trop	hy	1 TEAM (2 p	ersons) H	IK\$1,990 per team
□ Crossed cheque and make payable to "The Jockey Club Kau Sai Chau Public Golf Course Limited" Bank: Cheque No.: □ Please charge the following credit card, with details as below, for the event enrolled: □ VISA					
Card Issuing Bank:			Card Expiry Date:		
Cardholder's Name (Please print):			Contact No.:		
Cardholder's Signature:			Office Use		
			Auth Code:	De	ate: