

Annual Charity Golf Day

Open Fourball
9 Hole Stableford
Competition

*(Includes two course lunch with
wine, beer and soft drink)*

Monday 7 October 2019
Entry
\$75
per player

Teams of four, aggregate of
two best scores on each hole

*Longest Drive
Straightest Drive
Nearest the Pin
Second Shot Hole*

At the **PRESTIGIOUS** Frankston Golf Club
123 Golf Links Road, Frankston

Two Fields
Shot gun starts
10am and 1pm
Entry details overleaf.

*For further details contact
Jenny on 5973 2403 or
e: jenny.s@peninsulahospice.com.au*



Sincere thanks to our sponsors



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JAMES CROWDER
COMMUNITY REAL ESTATE



NATIONWIDE TREES

Peninsula Home Hospice Annual Golf Day 2019

Registration Form

Frankston Golf Club, Monday 7 October 2019

Entries close Friday 27 September 2019 or when field is full

Please enter your team of four players. If your team is incomplete, it will be combined with other entries to make up a full team. Please bring your own buggies on the day. No refund available once the draw is completed.

TEAM DETAILS: Please complete

Name _____

Telephone _____ Email _____

Golf Club _____ Handicap _____

Name _____

Telephone _____ Email _____

Golf Club _____ Handicap _____

Name _____

Telephone _____ Email _____

Golf Club _____ Handicap _____

Name _____

Telephone _____ Email _____

Golf Club _____ Handicap _____

Please tick preference: Morning 10:00 am tee-off with lunch 12:30 pm to 1:45 pm
Please be on time Afternoon 1:00 pm tee-off with lunch 11:00 am to 12:00 noon

Please return this form with payment of \$75 per person. You can make payment by cheque, payable to Peninsula Home Hospice or by providing your credit card details. Please post your form to Jenny Stampe-Knox at Peninsula Home Hospice, 327 Main Street Mornington, 3931 or scan it to jenny.s@peninsulahospice.com.au and advise if you have any special dietary requirements. Any queries please call Jenny on 5973 2403.

PAYMENT DETAILS: Please complete

Payment type (please tick) Visa Master Card Cheque

Amount (please tick) Team of four \$300 Pair \$150 Single \$75

Name on card _____ Expiry Date ____/____/____ CCV _____

Card Number _____/_____/_____/_____