



**MIDLANDS-BALLARAT RSL**  
SPORTS AND SERVICES CLUB

## **EILEEN RYAN BOWL**

**Ladies 2 Day Event**

SPONSORED BY  
MINERS REST GENERAL STORE

### **Thursday 13<sup>th</sup> February 2020**

**Event 1** Ladies 18 hole Stableford  
Entry fees \$30 per player includes lunch and morning tea  
Shotgun start assemble 8.30am for 9.00

### **Friday 14<sup>th</sup> February 2020**

**Event 2** Eileen Ryan Bowl - 18 holes Stableford  
Shotgun start assemble 8.30am for 9.00  
Ladies 3 Person Team Event  
\$90 per team of 3 (\$30 per head) includes lunch and morning tea

Each team to consist of 3 players from the same club. If an original player cannot play, a substitute player from the same club may be played.

The team with the highest aggregate score shall win the Eileen Ryan Bowl for one year.

Concurrent with event 3. In the event of a tie, a count-back system will apply.

**Event 3** **18 holes Stableford**  
A, B and C Divisions (relative to number of entries)  
First prize and runner-up trophy in each Division.

**Event 4** **Best Individual Aggregate Score over 2 Days**  
A, B and C Divisions-First Prize and Runner-up

**Send to-**

Lady Captain, Joan Miller  
Midlands Golf Club  
330 Heinz Lane,  
Invermay Park 3350

**Enquires:** Lady Captain Joan Miller

mobile 0438414907

email [golfentries@midlandsgolfclub.com.au](mailto:golfentries@midlandsgolfclub.com.au)

# EILEEN RYAN ENTRY FORM

Entry fee must accompany entry form

## THURSDAY 13<sup>th</sup> February 2020

NAME	CLUB	GOLF LINK NO.	CART (✓)	PLAYER SHARING THE CART
1.				
2.				
3.				

## FRIDAY 14<sup>th</sup> February 2020

NAME	CLUB	GOLF LINK NO.	CART (✓)	PLAYER SHARING THE CART
1.				
2.				
3.				

**NAME OF CLUB** \_\_\_\_\_ **CLUB EMAIL** \_\_\_\_\_

**CONTACT PERSON** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**CONTACT PERSON'S EMAIL** \_\_\_\_\_

Contact Michael Cooke at the Pro Shop if you require a motorised cart please. 035332 6965

**PLEASE ENCLOSE ENTRY FEE** \$ \_\_\_\_\_ **Entry fee must accompany entry form**

**CREDIT CARD PAYMENT**

**MASTERCARD**

**VISA**

**Credit Card Number** \_\_\_\_\_ **Expiry Date** \_\_\_\_\_ **CCV** \_\_\_\_\_

**Card Holder Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

## **PLEASE ADVISE DIETARY REQUIREMENTS:**

**SPECIAL REQUIREMENTS ARE ORDERED AND MUST BE ASKED FOR BY NAME PLEASE**

**Thursday** NAME \_\_\_\_\_ **DIETARY REQUIREMENT** \_\_\_\_\_

**Friday** NAME \_\_\_\_\_ **DIETARY REQUIREMENT** \_\_\_\_\_

