



I will be pleased to play in the  
**EALING SENIORS OPEN**  
to be held on  
**WEDNESDAY 3 AUGUST 2011**

SURNAME ..... FIRST NAME .....

ADDRESS .....  
.....  
..... POSTCODE .....

HOME TEL. .... BUSINESS TEL. ....

EMAIL .....

I AM A MEMBER OF ..... GOLF CLUB HANDICAP.....

AND CONFIRM THAT I WILL BE 60 YEARS OF AGE OR OVER ON THE COMPETITION DATE.

TICK BOX IF AGED 70-79

TICK BOX IF 80 OR OVER

Confirmation of your entry will be advised to you as soon as possible but starting times will be notified nearer the date of the competition.

**CLOSING DATE FOR THE COMPETITION IS 30<sup>th</sup> JUNE 2011**  
**ENTRANCE FEE OF £35 MUST ACCOMPANY THIS APPLICATION**

SIGNATURE ..... DATE .....

Cheques should be made payable to “**EALING GOLF CLUB SENIORS**” and sent to:-

Mr Mike Pearce  
Ealing Golf Club  
Perivale Lane  
Greenford  
Middlesex UB6 8TS

Queries to: Mike Pearce 020 8997 9411

Email: [mike99andcaroline@btinternet.com](mailto:mike99andcaroline@btinternet.com)