



SOCIETIES: BOOKING FORM FOR SOCIETIES

(reviewed June 2011)

Date:

Please complete the form below. The following information will give an initial outline of your requirements.

Name of Company/Society: _____ Date of Event: _____

Name of Contact: _____ Telephone No: _____

Address: _____

Number of Players: _____ Non-players: _____

Professionals: _____ Local Club Members: _____

COURSE RESERVATION:

The tees are reserved from _____ to _____ and from _____ to _____ at 10 minute intervals.

The following formats are acceptable. Please indicate which you wish to play.

Table with 6 columns: Time, 4 Ball, Greensome, Foursome, Medal, Stableford. Rows for AM and PM.

CATERING REQUIREMENTS:

Arrival Coffee & Biscuits _____ Breakfast _____

Lunch Snack Lunch _____ Buffet Lunch _____

Dinner Dinner _____

You must ensure that all members of your group or party have a handicap certificate.

Signed: _____ Date: _____

We would appreciate the return of this form within 2 weeks.