

IBGA Entry Form

Event: 2017 ISPS Handa Canadian Open Blind Golf Championship

Date: August 14th - 16th

Venue: Kings Forest Golf Club

City: Hamilton, Ontario, Canada

Player Information

Name: _____

Address: _____

City, State: _____

Zip/ Postal Code: _____

Country: _____

Telephone Number: _____

Mobile/Cell Number: _____

E-Mail: _____

Coach's Name: _____

E-Mail: _____

Shirt Sizes:-

Player: S M XL XXL XXXL men's women's

Coach: S M XL XXL XXXL men's women's

Current IBGA Handicap:

[Note: Players participating in this tournament must have an IBGA Handicap]

Select Sight Category

Please place an X before the appropriate Sight Category

Sight Category: B1 B2 B3

I want to play a practice round on Monday August 14th Yes No

My Coach wants to play a practice round on Monday August 14th Yes No

I want to play in the Claude Pattemore Memorial Scramble on August 17
 Yes No

My Coach wants to play in the Claude Pattemore Memorial Scramble on August 17th
 Yes No

I accept the conditions of this entry as set forth in the information letter provided.

Signature: _____

Date: _____

The \$250 registration fee plus additional guest dinners, must accompany this form. Make checks or money orders payable to *Ontario Visually Impaired Golfers* in Canadian dollars.

Print and Mail to:

**OVIG
Glenn Babcock
25 Lander Crescent
Thornhill, ON, L4J 8V2
Canada**

Return this form before April 30, 2017