



OLTON GOLF CLUB
Est. 1893

OLTON "YOUNG GUNS" GOLF OPEN - Thursday 28th July

5-Hole Competition - £5.00 (Food available at extra cost)

Closing date for entries - Friday 22nd July 2022

Please return this form to Christina Barns-Graham
Olton Golf Club, Mirfield Road, Solihull B91 1JH Tel: 0121 704 1936 Email: assistantsecretary@oltongolfclub.co.uk

The Start Sheet will be posted on our website

CAPITAL LETTERS PLEASE

Name

Address

.....

.....

Parent/Guardian Email

PAYMENT

£5 Entry Fee payable by Bank Transfer to Olton Golf Club Ltd
Sort Code 30-97-78 A/C 4801 9468 Ref OYGG childname

Parent/Guardian Tel No

Parent/Guardian Mobile

DOB Club

PARENT/GUARDIAN MUST COMPLETE THE FOLLOWING :

EITHER

I can confirm that I will be staying with my child for the whole duration of this competition and therefore the content of this form is not applicable.

FULL Name of Child: Signed: Date:.....
Parent/Guardian

OR

I cannot confirm that I shall be staying with my child for the whole duration of this competition and provide the following information. I understand that it will be retained **IN CONFIDENCE** and destroyed after the event.

1. **MEDICAL CONDITIONS, ETC** Please indicate below, in confidence, any health-related matters, including any **medical condition or illness, allergies or injuries**, which you think it is best we know about, including details of any **prescribed medicine** and dosage.

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2. **CONTACT DETAILS** If, for any reason, you intend to leave your child at Olton Golf Club whilst he/she is competing in the Olton Junior Open, please provide the following emergency contact details:

Surname of Parent/Guardian: Forename:

Home Tel: Mobile Tel:

3. **CONSENT** By signing this form I hereby confirm the following: -

- I am the adult responsible for the child named on this form.
- I acknowledge that Olton Golf Club is not responsible for providing adult supervision for my child except for the period of time whilst they are on the course taking part in the Olton Junior Open competition.
- I, being the parent or legal guardian of the child named on this form, hereby give permission for the event organiser or other responsible person from Olton Golf Club to give the immediately necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities where medical opinion is that it would be contrary to my child's interest for any delay to be incurred by seeking my personal consent.

FULL Name of Child..... Signed: Date:.....
Parent/Guardian