FILTON GOLF CLUB

OPEN CHAMPIONSHIP TROPHY (36 Holes) ENTRY FORM

FEE: **VISITORS £25** **MEMBERS: £15**

DATE: **SUNDAY 6th MAY 2012**

NAME: _____ **HANDICAP** _____

ADDRESS: _____

TELEPHONE NO: _____ **GOLF CLUB** _____

PREFERRED START TIME: _____

Please return this **FORM & FEE** and a **stamped addressed envelope** to:
The Competition Secretary, Filton Golf Club, Golf Course Lane, Filton, Bristol, BS34 7QS

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