



DORSET COUNTY GOLF UNION



in
conjunction with



SHERBORNE AND YEOVIL GOLF CLUBS

present

THE SOUTH OF ENGLAND 72 HOLE BOYS' OPEN CHAMPIONSHIP

competing for

“THE TONY JACKLIN PUTTER”

Tuesday 3rd August 2010 at Yeovil Golf Club
Wednesday 4th August 2010 at Sherborne Golf Club

Entries close: Monday 12th July 2010

The event carries R&A Amateur World Ranking Points

COMPETITION RULES

1. The Tony Jacklin Putter will be a 72-hole Stroke Play event. The leading 30 boys and ties after 54 holes will go forward to the 4th Round.
2. Entry will be limited to 66 competitors handicap limit 6, balloting out by handicap. Players must be of Amateur Status and be under 18 years of age on 1st January 2010.
3. The competition will be played in accordance with the Rules of Golf as laid down by the R & A together with any local rules approved by the competition committee.
4. No caddies are permitted and no advice is to be given to competitors other than from competition officials.
5. Boys will be expected to obey the dress rules of the respective golf clubs as outlined on the starting sheet.
6. Scratch Score Prizes will be awarded to:-
 - a. The boy with the lowest 72-hole score who will be "The South of England Boys' Open Champion" receiving the Tony Jacklin Putter.
 - b. The second and third best scores over 72 holes.
 - c. The best gross scores over each 36 holes and each 18 holes.
 - d. The best 72 hole score by a boy under the age of 15 on 1st January 2010.In the event of a tie for first place there will be a "sudden death" play-off. Other ties will be decided on last 36, 18, 9 holes etc. No boy may win more than one prize. The prizes will be presented on the Wednesday evening as soon after the completion of play as possible.
7. A practice round will be permitted at each club on the Sunday and Monday afternoon after 2.30 pm. Start times must be booked in advance by ringing the Secretary of each club on (01935) 814431 Sherborne and (01935) 422965 Yeovil. A fee of £15 will be required. (Normal visitor green fee rates will apply to parents wishing to play)
8. A copy of the start sheet will be sent by post or email to all competitors at least one week before the event.
9. The Entry and Parental Consent forms attached should be completed, ensuring they have been signed by the competitor, parent and Club Secretary. The entry & parental forms, fee and a **stamped addressed envelope** are to be sent to:-

The Secretary, Dorset County Golf Union
5 St James Road, Ferndown BH22 9NY
To reach him by not later than Monday 12th July 2010

RESULTS OF THE 2009 COMPETITION

Champion		(Reduced to 54 holes)
Max Orrin	<i>North Forelands GC</i>	74+69+68=211
Runner Up		
David Blick	<i>East Devon GC</i>	79+66+67=212
Third		
Samuel Edwards	<i>Bigbury GC</i>	78+67+67=212
Under15 - Winner		
Sam Towler	<i>Letchworth GC</i>	78+71+72=221

ENTRY FORM

**THE SOUTH OF ENGLAND
72 HOLE BOYS' OPEN CHAMPIONSHIP
TUESDAY and WEDNESDAY 3rd & 4th AUGUST 2010
at
Yeovil & Sherborne Golf Clubs**

*To: Mr. Ian Hulse
5 St James Road
Ferndown
BH22 9NY
email: secretary@dcgu.org.uk
Tel: 01202 861185*

FULL NAME (Block Capitals) _____

ADDRESS: _____

_____ POST CODE: _____

TEL. NO: _____ DATE OF BIRTH: _____

HOME GOLF CLUB: _____ EXACT HANDICAP: _____

EMAIL ADDRESS: _____ @ _____

CDH Individual Number: _____

ENTRY FEE: £30.00 (to include lunch on both days) payment to be made by cheque in advance payable to D.C.G.U.

SIGNED: _____ DATE: _____

Certificate of Handicap by Club Secretary: (Not required if you have a CDH Number)

SIGNED: _____ GOLF CLUB: _____

PARENTAL CONSENT FORM

Competitors Name: (Please Print) _____

In caring for the best interests of your son it is important the Dorset County Golf Union (DCGU) know whether he suffers from any medical condition or illness, or whether he is currently receiving medical treatment of any kind.

Please indicate below any health related matters, including injuries, details of any allergies, prescribed medicine and dosage or of any special dietary requirement which you think it is best we know about. Any information given will be treated in the strictest of confidence however please be aware that this information will be passed on to the Medical Emergency services should the need arise.

Name of Competitors Doctor: _____ Doctors Practice Tel Number _____

I,being parent/guardian of the above named child, hereby give permission for the DCGU responsible person to give the immediately necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

IN THE EVENT OF ANY CHANGES TO THE ABOVE INFORMATION, PLEASE NOTIFY THE SECRETARY DCGU IMMEDIATELY:

Telephone: 01202861185 / 07815144582

USE OF PHOTOGRAPHIC EQUIPMENT AT DORSET COUNTY GOLF UNION CHAMPIONSHIPS

This form is to be signed by the legal guardian of a child or young person under the age of 18, together with the child or young person.

- The Dorset Count Golf Union (DCGU) recognises the need to ensure the welfare and safety of all young people in golf. As part of our commitment to ensure the safety of young people, we will not permit photographs, video images, or other images of young people to be taken or used without the consent of the Parents/ Carer and the young person.
- DCGU will follow the guidance contained within the Children in Golf Strategy Group Policy and Procedures.
- DCGU will take steps to ensure that these images are used solely for the purposes they are intended, which is the promotion and celebration of the activities of the DCGU.

If you become aware that these images are being used inappropriately, you should inform the County Secretary immediately: 01202 861185

If, at any time, the Parent/ Carer or the young person wishes their image to be removed from the DCGU website, 7 days notice must be given to the Secretary DCGU, after which the image will be removed.

To be completed by the parent/ Carer:

I _____ (*full name of parent/ Carer*) consent to DCGU photographing

_____ (*name of young person*) under the stated rules and conditions and I confirm I have legal parental responsibility for this child and am entitled to give this consent. I also confirm that there are no restrictions related to taking photographs.

Signed _____ Date: _____

To be completed by the young person:

I, _____ (*name of young person*) consent to DCGU photographing my involvement in golf under the stated rules and conditions.

Signed _____ Date _____