

## 2015 Non-Member Entry Form and Tax Invoice ABN: 46 127 641 829

## This entry form should only be used by Non-Members of the PGA of Australia

PERSONAL DETAILS											
First Name	irst Name					Home Phone					
Last Name				Mobile							
Represents (VIC,NSW)			Email								
Address				ров							
TOURNAMENTS				I							
TOURNAMENT		PRE QUALIFYING		ENTRY FEES		ENTRIES CLOSE	INITIAL TO ENTER				
Vic Open 5-8 February			PGA of Australia Members \$66.00		rs	Thursday 15 <sup>th</sup> January 2015 at 5pm AEDT					
13 <sup>th</sup> Beach Golf Links		Kooringal Golf Club	No	on-Members		2010 at 5pm ALD1					
AUD \$250,000 Vic PGA		Curlewis Golf Club  Monday 9 <sup>th</sup> February	PGA of A	\$250.00 Australia Membe	rs	Tuesday 20 <sup>th</sup> January					
10-13 February		, ,	\$66.00			2015 at 5pm AEDT					
Huntingdale Golf Club AUD \$100,000		Long Island Golf Club	Non-Members \$250.00								
QLD PGA 19-22 February		Monday 16 <sup>th</sup> February	PGA of Australia Members \$66.00		rs	Thursday 29 <sup>th</sup> January 2015 at 5pm AEDT					
City Golf Club		Middle Ridge Golf Club	Non-Members			2013 at Spill ALD1					
AUD \$120,000  * Entry Fee includes GS	T if applie	anhla		\$250.00							
<ul> <li>A levy of five (5) perceign</li> <li>shown prior to the deduction</li> </ul>	nt will be uction of	deducted from the prize mothe levy.	-			ers. All prize money listed or	•				
		Amateur entries for the	Vic Open	must enter throu	ugh Go	olf Victoria					
FOR AMATEURS											
Amateurs entering the pr	e-qualify	ing event must have a hand	dicap of 2.4	or less, unless ot	therwis	e stated					
Home Club:				Exact	Golf A	ustralia Handicap:					
		mber of the above club; I as at// Handic			select	ed tournaments and confi	rm that his				
Signature of Secretary o	f Home C	llub:									
FOR PROFESSIONALS Details of PGA or PGA T		ation:									

**PGA NATIONAL OFFICE** 



## **PAYMENT**

For credit card payme	ents please e	nter the	nformation	below:				
Type of card (please	tick):		Visa		MasterCar	<sup>-</sup> d		
Card Number:								
Expiry Date:								
CVV:		]						
Cardholder Name:								
Signature:								
Date:								
		_						
By signing below, I a Handbook as it perta								
Signature				_				

## **PLEASE SUBMIT TO:**

Tour Division PGA National Office 600 Thompson Road Victoria 3977 Australia

EMAIL tour@pga.org.au

FAX +61 3 9783 0000