

# TUESDAY 7<sup>th</sup> AUGUST 2012

## Entry Form

Active Handicaps only – Max Boys 28, Girls 36

All Juniors must submit the appropriate Parental Consent form with their entry  
(available on the web site)

Name.....Club.....

Handicap.....CDH No.....

Address.....

.....Post Code.....

Telephone No.....

E Mail address: .....

Team Entry Yes / No .....

Active Handicap confirmed – Club Secretary/Junior Organiser .....

Enclosed remittance cheque to the value of £..... Payable to Hockley Golf Club

**HOCKLEY GOLF CLUB**  
**JUNIOR OPEN - PARENTAL CONSENT FORM 2012**  
**PLEASE SUBMIT WITH MAIN APPLICATION FORM**

Players Name: ..... Date of Birth.....

Address.....

.....Post Code.....

Telephone No:..... E Mail:.....

In caring for the best interests of your son/daughter, it is important that Hockley Golf Club knows whether he/she suffers from any medical condition or illness, or whether he/she is currently receiving any medical treatment of any kind.

Please indicate below, in confidence, any health related matters, including injuries which you feel may be relevant; including details of any prescribed medicine and dosage; or any special dietary requirements.

Asthma	Yes/No	Fits or Blackouts	Yes/No
Epilepsy	Yes/No	Diabetes	Yes/No
High Blood Pressure	Yes/No	Heart problems	Yes/No
Migraine	Yes/No		

Other Details.....

I consent to my son/daughter participating in events and activities organised by Hockley Golf Club.

I consent to my son/daughter receiving essential medical treatment, as necessary, when a qualified medical practitioner prescribes the treatment.

NHS Number:..... NHS Doctor.....

Address.....

.....Post Code:..... Telephone No:.....

Name of Parent or Guardian.....

Tele No: Home:..... Work..... Mobile:.....

Signature:..... Date:.....

There may also be occasions when, to record a victory or significant event a photo/video may be taken of your son/daughter for recording or publicity. Hockley Golf Club will ensure that the photographs are only used for the intended purpose. I am happy for this to take place.....Please sign.

There may also be occasions where your son/daughter may need to be carried in a vehicle of one of the Junior organisers e.g. to a match, to a remote tee on the course or for medical treatment. I am happy for this to take place.....Please Sign

**If any of the above information changes, Please advise the admin office immediately Tel No 01962 713165**