

I, \_\_\_\_\_  
*First Name* *Family Name*

Nationality \_\_\_\_\_

**Wish to enter the**

**Competition:** \_\_\_\_\_

Date: \_\_\_\_\_

Email address \_\_\_\_\_

Cell. number (Intern. Cod ) \_\_\_\_\_

Home number (Intern. Code) \_\_\_\_\_

I, conform with the Rules of Amateur Status, in every respect confirm that my handicap certified below is my exact handicap at the date of entry.

Hcp \_\_\_\_\_ Exact hcp \_\_\_\_\_  
(Signature of Competitor)

Date \_\_\_\_\_

**CERTIFICATION OF HANDICAP BY CLUB OR FEDERATION**

**I hereby certify that the handicap of Entrant is conforming with the current Ega Handicap System to the best of my knowledge and belief, the Entrant is an Amateur Golfer in accordance with the Rules of Amateur Status. (The handicap certified at the date of entry will be used for all purposes).**

**Signature and Seal of certifying authority**

( Federation) \_\_\_\_\_