



**2022 Bermuda Golf Association
Amateur Match Play Championships**
Hosted by Port Royal Golf Course



Official Entry Form

Dates Friday, April 8th – Sunday, April 10th, 2022

**Entry includes minimum of three tournament rounds
and player lunch on Sat. and Sun.**

Entry Fee \$250 per person, inclusive of cart
**** \$180 per person for Port Royal & BJGA members ****

Format Competition will be in two stages:
1. Qualifying - 18 holes stroke play to determine seeds for match play.
Note: All divisions will qualify on Friday.
2. Match Play - General Numeric Draw will be used. See “Conditions of Competition” for schedules.
Note: Men and Ladies will be seeded into flights of 16; Senior Men will be seeded into flights of 8.

Divisions Please indicate the division you wish to enter: (select one)

- Men’s Championship** - Black tees (6,842yds; 73.1 / 130)
- Senior Men’s Championship** - White tees (5,894yds; 68.8 / 124)
-- **Eligibility:** Must be 55 on or before April 8th, 2022
- Ladies Championship** - Red tees (5,176yds; 69.4 / 122)

Deadline **Entries close at 5:00pm on Monday, April 4th, 2022. Late entries will not be accepted.**

Player Information (please print)

Name: _____ **Date of Birth:** (dd/mm/yy) _____

Telephone: (home) _____ (work) _____ (cell) _____

Email: _____

Verification of Handicap

GHIN No.: (if applicable) _____ **Handicap Index:** ____ • ____ Select for “plus” handicap

Issuing Club: _____ **Country / State (if USA):** _____

Championship Committee will verify all handicaps prior to Registration

Methods of Payment: (select one) Online transfer Visa MasterCard Discover Check

i) Online transfer details: Bank of Butterfield account no.: **20-006-060-072135-100** – Bermuda Golf Association
(Please include your full name and “Match Play Entry” so the Committee can correctly identify the transfer)

ii) Make check payable to “Bermuda Golf Association” and return to: P.O. Box HM 433, Hamilton HM BX, Bermuda

iii) Please indicate payment amount: (select one) **Non-Member** \$250 **Member** \$180

Credit Card No.: _____ Expiry Date: (mm/yy) _____ CVV/CVC: _____

Cardholder Name: _____ Signature: _____