|  |  |  |
| --- | --- | --- |
| C:\Users\devo0131\AppData\Local\Microsoft\Windows\INetCache\Content.Word\Balliol-crest-CMYK-small.jpg | Balliol CollegeOxford University Intercollegiate Golf Tournament *Friday 12th April 2019*ENTRY FORM |  |
| \*Name |  | \*Matriculation year |  |
|  |  |  |  |
| Home address |  | Telephone (home) |  |
|  |  |  |
|  |  | Telephone (office) |  |
|  |  |  |  |
| Email |  |  |  |
| Golf Club\* |  | \*Handicap |  |

**The boxes marked with an asterisk are compulsory. If you want the organisers to be able to email you directly, please include your email address.**

**I would like to be included in the Balliol College team for the Oxford University Inter-Collegiate Golf Tournament at Frilford Heath Golf Club on Friday, 12th April 2019**

|  |  |  |  |
| --- | --- | --- | --- |
| *Description* | *#* | *COST* | *TOTAL* |
| Tournament, including lunch |  | @ £61.00 |  |
| Tournament, including lunch (Frilford Heath GC members) |  | @ £26.00 |  |
| Tournament, including lunch for anyone < 25 years age still studying full time |  | @ £30.50 |  |
| Lunch for non-playing guests – number |  | @ £22.00 |  |
| Reception & dinner at University College |  | @ £50.00 |  |
| Accommodation *(subject to availability)* |  | @ £X.XX |  |
| **I enclose a cheque in the amount of** |  |
| *Please make cheques payable to Balliol College* |

|  |  |  |  |
| --- | --- | --- | --- |
| My preferred starting time is between | 8.30 to 9.00 | 9.00 to 9.30 | 9.30 to 10.00 |
| Please tick |  |  |  |

|  |
| --- |
| Please indicate your dietary requirements (if any) |
|  |

|  |
| --- |
| I have the following guests (tick columns for (L)unch and/or (D)inner): |
| Names:  | L | D | Special dietary requirements |
|  |  |  |  |
|  |  |  |  |

Please *return this form with your cheque to*

*Development Office
Balliol College*

*Oxford OX1 3BJ*

*development.office@balliol.ox.ac.uk*

*01865 277636*