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## Handicap certificate of the players

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| Country: |

## Team Super Seniors Championship

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| **Players Name** | | **Exact Hcp** | **Home club** |
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| **Date:** | **Captains signature** |  | |

## Team Super Seniors Cup

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| **Date:** | **Captains signature** |  | |

## Team Masters Trophy

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| **Players Name** | | **Exact Hcp** | **Home club** |
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| **Date:** | **Captains signature** |  | |

**Please email this form to anne-live@seniorgolf.no before June 4.**

**The form must be updated and signed before the captains meeting.**