Registration form 4:

## Handicap certificate of the players

|  |
| --- |
| Country: |

## Team Super Seniors Championship

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

## Team Super Seniors Cup

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

## Team Masters Trophy

|  |  |  |
| --- | --- | --- |
| **Players Name** | **Exact Hcp** | **Home club** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **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.**