ROYALE CUP CANADIAN JUNIOR GIRLS CHAMPIONSHIP

Royale Cup
Canadian Junior Girls' Championship

Championship Application

Please complete the following, to be received with the application fee by 5:00 p.m. (EDT) on Wednesday, June 30, 2010 at: RCGA, Amateur Championships Division, 1333 Dorval Drive, Suite 1, Oakville, ON L6M 4X7.

Faxed or photocopied applications will not be accepted.

Application fee - $225.00

Please print **neatly** and accurately in CAPITAL LETTERS.

Surname: _____ Given Name: _____

Player's Home Address: _____

City: _____ Province: _____ Postal Code: _____ Home Phone: _____

Business Phone: _____ Language Information (Indicate language choice): English ☐ French ☐

Date of Birth: _____ (Month) / _____ (Day) / _____ (Year) Age (as of August 6, 2010): _____

E-mail Address (must be printed clearly): _____

Home Club: _____ Club City, Province/State: _____

Province/State of Membership: _____

High school graduation date: (Year) _____ Have you signed a letter of intent? Yes ☐ No ☐

If Yes, name of school: _____

Would you like your contact information given out to interested University/College Coaches? Yes ☐ No ☐

Provincial Hospital Insurance #: _____ Medical Conditions: _____

Non-Competitor tickets for the opening reception and championship dinner will be available at registration.

Handicap Factor Verification (must be completed)

* Handicap Factor must be verified by a club official, handicap chairman, CPGA or PGA golf professional.

My current 2010 Handicap Factor is: _____ and may be verified by: _____ / _____

(Club Official Name: Please print) (Club Official: Signature)

Club Official's Title: (Please print) _____ Club Official's Telephone: _____

Name of club certifying this Factor: _____

(Note: A player falsifying her handicap is liable to indefinite disqualification from RCGA sanctioned events)

Method of Payment

Indicate method of payment.

Visa ☐ MasterCard ☐ American Express ☐

Card Number: | | | | | | | | | | | | | | | | Expiry: /

3-Digit Security #: | | | |

Cardholder's Name (Please Print): _____ Signature: _____

Conditions of the RCGA

In submitting this application, I agree to the following: I agree to the championship regulations, attached hereto. I have read the requirements for acceptance of places, notice of withdrawal, and registration at the championship site. I understand the eligibility requirements listed in this notice, and I conform to the Rules of Amateur Status in all respects. I agree there are certain risks inherent in the game of golf and accept all personal liability for all such risks. I agree the responsibility for ensuring that this application is received by the RCGA no later than 5:00 p.m. EDT on Wednesday, June 30, 2010 is mine; and that this application will be automatically rejected if received by the RCGA after such date and time. I acknowledge that my image or likeness may be included in a photograph, recording, transmission or other reproduction of this event and consent to the RCGA's use of my image and likeness in publicity for this event and other events, programs and services offered by the RCGA, its agents or partners, without further compensation or notice. I agree that this entry is subject to rejection at any time (including during the Championship) by the RCGA. The reason for rejection may include unbecoming conduct.

SIGNATURE OF APPLICANT: _____ Date: _____

Certification of Parent or Guardian

As parent of legal guardian I certify that the information on this application is true, and that I am aware of the applicant's intention to participate in this championship; and that she does so with my approval and consent. Further I (we), accept the risk of all dangerous conditions arising from and inherent in participation in this championship; and in the transportation connected therewith, regardless of whether such transportation is arranged for or provided by the RCGA. In case of a medical emergency during the championship, I authorize a qualified medical doctor to take all necessary measures in the treatment of this applicant.

SIGNATURE OF PARENT OR GUARDIAN: _____ Date: _____