

# 15<sup>th</sup> ANNUAL CORPORATE CUP CHALLENGE

at Berwick Montuna Golf Club & Driving Range

## Friday 7<sup>th</sup> March 2025

Event: 3 Person Ambrose

Hit Off: 11.30am Shotgun Start

**Entries CLOSE** Thursday 22<sup>nd</sup> February 2024 OR earlier if field capacity is reached

### ENTRY INCLUDES:



A chance to win **\$10,000** by having a "Hole in One" on the **4<sup>th</sup> Hole** (Amateur golfers ONLY) **AND** a chance to win the **Ace Society National Hole in One Jackpot** on the **9<sup>th</sup> Hole**



- Golf for Team of **3** players
- ON COURSE** Food & Drinks
- NTP's on **ALL** Par 3's
- Longest Drives for **3** grades



- Novelty holes
- After Game Food
- Fantastic Prizes
- Renowned after game **SHOOT OUT**



**TEAM SPONSORSHIP packages available**

**ENTRY FEE (Team of 3):**

**\$500** inc. GST



### ENTRY FORM

*Please complete details below and return with payment to Berwick Montuna Golf Club, PO Box 126, Beaconsfield, 3807 or Fax: 9796 1719 or email [manager@berwickmontuna.com.au](mailto:manager@berwickmontuna.com.au)*

**CORPORATE / TEAM NAME:** \_\_\_\_\_

**PLAYER DETAILS:**

PLAYER 1: \_\_\_\_\_ H/CAP: \_\_\_\_\_ GOLFLINK # \_\_\_\_\_

PLAYER 2: \_\_\_\_\_ H/CAP: \_\_\_\_\_ GOLFLINK # \_\_\_\_\_

PLAYER 3: \_\_\_\_\_ H/CAP: \_\_\_\_\_ GOLFLINK # \_\_\_\_\_

**NOTE:** The Club has a **limited number of motorised golf carts available for hire on the day.** The cost is \$45 per cart.

Please indicate **number of golf carts required** on the day (Standard hire conditions will apply): **Carts Required:** \_\_\_\_\_

Please note that players who do not have an official Golf Aust. Handicap will be allocated a handicap of 22 on the day

**CONTACT DETAILS:**

Name: \_\_\_\_\_ Ph (W): \_\_\_\_\_

Ph (Mob): \_\_\_\_\_ Email: \_\_\_\_\_

**PAYMENT DETAILS:**

*Please Note: Payment is required at time of entry*

**PAYMENT AMOUNT:** \_\_\_\_\_

**TYPE (Please Circle):**      Cash                      Credit Card                      Cheque

**Credit Card Details:**      Visa                      Mastercard                      Amex

**Card Number:**

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**CCV:** \_\_\_\_\_ **Expiry Date:** \_\_\_\_\_ / \_\_\_\_\_ **Signature:** \_\_\_\_\_

