**GCDGA INTERCLUB PENNANTS**

**2025**

**CLUB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SERIES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**INTERCLUB TEAM CAPTAIN (A): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MOB: …………………………………………………………………**

**EMAIL: ………………………………………………………………..**

**INTERCLUB TEAM CAPTAIN (B): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MOB:……………………………………………………………………**

**EMAIL: …………………………………………………………………**

*Your club has entered into the 2025 GCDGA Interclub Pennant Series. Please complete the above details for your team captain(s) and then when you have decided on the size of your pennant group add their details (on the next page).*

**Send this in to the GCDGA Secretary, Craig Brown, by an email:**

**secretary@gcgda.com.au**

**This information must be received within 5 days of the commencement of Rd 1.**

**Thank you**

**Craig Brown**

**GCDGA Secretary**

2025 INTERCLUB TEAM LIST

* ***Please enter the name (first name and last name) as well as the player’s FULL GOLF LINK NUMBER in the space below.***
* ***Enter also their EXACT FROZEN GA HANDICAP – this can only be done within 21 days prior to the first round of pennant.***
* ***When completed (and 5 three days before the first round of pennants), BY email***

***secretary@gcdga.com.au*** ***mob: 0421 630 180***

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| --- | --- | --- |
| ***CLUB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_******PLAYERS’ FULL NAME*** | ***FULL GOLF LINK NUMBER******(ESSENTIAL)*** | ***FROZEN******GA HANDICAP******21 DAYS******PRIOR TO RD 1*** |
| eg IAMA GOLFER | 4 | 0 | 7 | 2 | 3 | 0 | 4 | 4 | 1 | 1 |  12.6 |
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Forward additional players information added after this sheet has been submitted to:

***secretary@gcdga.com.au*** ***mob: 0421 630 180***