

CLUB:_____

GOLF WESTERN AUSTRALIA (INC) 2024 WOMEN'S SENIOR 4BBB PENNANTS

TEAM NOMINATION FORM

DIVISION:_____

	FIRST NAME	SURNAME	GA Hcp	Daily Hcp	Combined Daily Hcp
1					
2					
3					
4					
Res.					
Submitt	ed by:	Da	te:		

NOTE: Nomination forms to be handed to the Club Official no later than thirty (30) minutes prior to hit off time.