

COMPETITOR REGISTRATION CERTIFICATE & AGREEMENT

Date:			Zone VI North
Last Name	:	First Name:	
Date of Bir	th: Month: Day:	Year:	
Mailing Ad	dress:		
City:	British Co	lumbia. Postal Code:	
Telephone	: ()		
E-mail:			
Home Club):		
Parent(s)/0	Guardian(s): Name(s):		
Telephone	: Home: ()(Cell: ()	_ Bus: ()
Parent's E-	-mail:	_	
I, the undersign	Certify the above information to be to privileges incidental thereto, agree to British Columbia Golf (BC Golf), and conduct, by-laws, rules and/or regula provincial, national or international to contraventions when making such do other organizing bodies such as club	o abide by the code of conduct I (b) Accept that BC Golf: Will ations, Has sole discretion rega eams or events, and Will consi ecisions, including code of con os, zones, Golf Canada, USGA that BC Golf is not responsible	the granting of this certificate to me, with the t (see reverse), by-laws, rules and regulations of exact discipline for any breach of the code of arding entry into BC Golf events and selections der any and all of my code of conduct aduct violations that occurred at events hosted by A, AJGA, PNGA, IJGA, Junior America's Cup and e for any injuries, damage of claims resulting.
	Competitors Signature:		Date:
	Parent(s)/Guardian(s) Signature:		Date: