



30th Boys Championship
Conducted By Western Pennsylvania Golf Association
Tuesday, June 13, 2006
Hill Crest Country Club • Lower Burrell

ELIGIBILITY:

Boys who have not reached their sixteenth birthday by June 13, 2006, whose families reside in the Western Pennsylvania District.

FORMAT:

- DIVISIONS:
- A. Age 14 and 15 for the Skip Potts Trophy
 - B. Age 13 and below for the James Simons Trophy —course will be shorter than division A.

Prizes will be awarded in each division. Contestants in age group B may play in group A by marking the entry form appropriately.

Eighteen holes of stroke play. In the event of a tie for first place, in either division, a hole-by-hole playoff will take place immediately after conclusion of play.

Play will be governed by the 2004-07 USGA Rules of Golf, conditions stated on the WPGA's Rules of Play Card, and other Local Rules as posted.

Automotive transportation, Caddies: Contestants are required to walk. Use of motorized carts is prohibited for players and spectators. Caddies are permitted, provided the players not use parents, brothers, sisters, or guardians to serve as caddies.

ENTRIES: FORM, FEE, and CLOSING DATE

Application and fee of \$35.00 must reach the WPGA office by Wednesday, May 31, 2006, to be considered for entry. Copies of the form are acceptable as well as forms from the Association's website (www.wpga.org). Fee covers golf, prizes and food. A service fee of \$5.00 will be deducted for withdrawals after the deadline of May 31, 2006, of all accepted entries. Late entries will be placed on an alternate list to fill spots if they become available until the committee establishes final groupings. There will be an \$10.00 fee for late entries that are accepted into the field. Committee decisions with this procedure are final. All contestants must be notified IN ADVANCE by WPGA in order to compete.

NOTICE: By submission of this entry, I agree to the following:

- I have read and understand the entry requirements and championship regulations.
- I agree that there are certain risks inherent in golf and accept personal and sole liability for such risks including but not limited to health risks.
- This entry is subject to rejection at any time (including during the Championship) by the WPGA. The reason may include unbecoming conduct.
- Responsibility for ensuring this application is received by the WPGA prior to the specified deadline is mine alone and that this application may be automatically rejected by the WPGA if received by after such date and time.
- Risk of delay or error in transmission is solely with me and that the WPGA has no liability with respect to any such delay or error and the consequences there from, including the entry not being accepted.

Application for Entry



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Completed application and entry fee of \$35.00 must reach WPGA office by Wednesday, May 31, 2006.
Mail Entries to: Western Pennsylvania Golf Association, 324 Fourth St, Pittsburgh, PA 15238

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Date of Birth: _____

Club Name: _____

GHIN #: _____ Handicap Index: _____

If no USGA Handicap Index, Scoring Average: _____

Age Group B—If you wish to compete in Group A, Please Check Here: _____

I agree to the attached Championship regulations, and have noted entry requirements.
I agree there are certain risks in the game of golf and I accept personal liability.
I agree this entry is subject to rejection at any time (including during the Championship) by WPGA. The reason for rejection may include unbecoming conduct.
I agree to abide by any Code of Conduct adopted by the Association and appropriately distributed.

Signature: _____ Date: _____

Certification of Parent or Guardian

As parent or guardian of the applicant, I hereby certify that I am familiar with his plans to participate in the WPGA Boys Championship and that he does so with my approval and consent. In case of a medical emergency occurring during this Championship, I authorize a qualified medical doctor to take all necessary measures in the treatment of this applicant.

Signature: _____ Relation: _____

Make checks payable to Western Pennsylvania Golf Association, 324 Fourth St, Pittsburgh, PA 15238