



FOREST OF GALTRES GOLF CLUB

Skelton Lane, Wigginton, York. YO32 2RF Tel: 01904 766198



VISITORS BOOKING FORM

NAME OF SOCIETY:

DATE OF VISIT:

1ST CHOICE:..... 2ND CHOICE:.....

NAME OF ORGANISER:.....

ADDRESS:

.....

.....

..... POSTCODE:.....

DAY TIME TEL NO: HOME TEL NO:.....

MOBILE TEL NO:..... FAX NO:.....

NO. OF PLAYERS IN PARTY: EMAIL:.....

18 HOLES (please tick)

FORMAT OF PLAY (please tick)

ALL DAY

27 HOLES

3 BALL

36 HOLES

4 BALL

STARTING TIMES REQUIRED AM

..... PM

Where did you hear about us?

1. Repeat booking

2. Website

3. Word of mouth

4. Golf Directory

5. Yellow Pages

6. Golf Magazine

7. Other (please state).....

.....

CATERING REQUIREMENTS (please tick)

*SOCIETY SPECIALS / WINTER DEALS

(*please delete as appropriate)

PACKAGE 1

PACKAGE 2

WINTER WARMER
Par for the Course

PACKAGE 3

PACKAGE 4

WINTER WARMER
Birdie Special

All catering requirements must be confirmed 7 days prior to your visit Tel: 01904 750287

Upon receipt of the booking form together with your deposit we will be pleased to confirm your date and time of play.

I enclose a non-returnable deposit of _____ (£5 per head). Please make cheques payable to Forest of Galtres Golf Club.

Signed:

Date: