



# REGISTRATION FORM

## 2020 PRIME MINISTER'S CORPORATE GOLF CHALLENGE

Friday 30<sup>th</sup> October 2020- Royal Port Moresby Golf Club

Company/Team Name:

Contact Name:

Phone:

Email:

Please fill in the names of your team members, handicaps and sign below

Name of Player (s)	Handicaps	Shirt Size (S/M/L/XL)

I have read the golf rules and I accept the Terms and Conditions provided to me.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date