

THE 2014 BOYS AMATEUR CHAMPIONSHIP

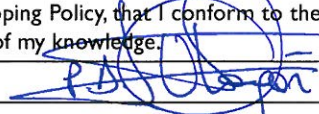
TO BE COMPLETED BY ALL ENTRANTS

Please complete all relevant areas in BLOCK CAPITALS and return with entry fee to the address below.

For office use only

FIRST NAME	IVAN	FAMILY NAME	CANTERO
ADDRESS	RFEG c/ ARROYO DEL MONTE, N° 5		
CITY	MADRID		
COUNTRY	SPAIN		
POSTCODE	28049	TEL NO.	+34915552682
DATE OF BIRTH	24021996	MOBILE	+34630088055
EMAIL	ldoretouhagonarfegolf.es		
EXACT H/CAP. (eg 0.4)	+3.5	CDH ID NO.	
NATIONALITY (e.g. SCOTTISH)	SPANISH		
HOME CLUB	LLANES		

- (a) I declare that I am/am not (delete as appropriate) within WORLD AMATEUR GOLF RANKING™ listing 1-2000, see www.wagr.com
- (b) I declare that I have read and understood the Conditions for the Championship, including the requirements of the International Golf Federation's Anti-Doping Policy, that I conform to the Rules of Amateur Status in all respects and that all of the above information is correct to the best of my knowledge.

SIGNATURE  DATE 16/6/2014.

The entry fee is £35 Credit/Debit card payment can be made or a cheque payable to R&A Championships Limited.

MASTERCARD ☐ VISA ☒ MAESTRO ☐ Card No 4546530240707967

Issue No / Start Date / Expiry Date 10/17

TO BE COMPLETED BY ENTRANT'S PARENT OR GUARDIAN

NAME

ADDRESS if different from above

RELATIONSHIP TO ENTRANT

ENTRANT'S DATE OF BIRTH DDMMYYYY

I certify that the date of birth and all other information provided by the entrant is correct. I also confirm that I have read and understood the Conditions for the Championship, including the requirements of the International Golf Federation's Anti-Doping Policy.

SIGNATURE DATE

TO BE COMPLETED BY THE SECRETARY OF THE HOME CLUB IF WITHIN GREAT BRITAIN & IRELAND

I hereby certify that the exact handicap (eg 0.4) of the entrant is under the current CONGU handicapping system and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

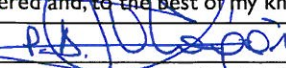
SECRETARY'S SIGNATURE

NAME AND ADDRESS OF CLUB

TEL NO.

TO BE COMPLETED ON BEHALF OF ENTRANTS FROM OUTSIDE GB & I

I hereby certify that the exact handicap (eg 0.4) of the entrant is +3.5 under the handicapping system adopted in the country from which he has entered and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

SIGNATURE  POSITION

NAME AND ADDRESS OF CERTIFYING AUTHORITY R.F.E.G. c/ ARROYO DEL MONTE, N° 5 MADRID - SPAIN

DATE 16/6/2014.

R&A Championships Limited will use the information you provide on this entry form to process your entrance to and participation in The Boys Amateur Championship. It may also be used by R&A Championships Limited to: (a) update the WORLD AMATEUR GOLF RANKING™, if relevant; and (b) provide you with information on Rule updates or similar information regarding the game of golf. R&A Championships Limited may share your information within the R&A group of companies for these purposes.

At all times R&A Championships Limited will process your information in accordance with the Data Protection Act 1998.

Return to: ENTRIES DEPARTMENT, R&A CHAMPIONSHIPS LIMITED, ST ANDREWS, FIFE, KY16 9JD, SCOTLAND

Tel: +44 (0) 1334 460000 Fax: +44 (0) 1334 460005 Email: entries@randa.org Website: www.Randa.org

THE 2014 BOYS AMATEUR CHAMPIONSHIP

TO BE COMPLETED BY ALL ENTRANTS

Please complete all relevant areas in BLOCK CAPITALS and return with entry fee to the address below.

For office use only

FIRST NAME	KLAUS	FAMILY NAME	GANTER
ADDRESS	RFE G c/ ARROYO DEL MONTE, N° 5		
CITY	MADRID		
COUNTRY	SPAIN		
POSTCODE	28049	TEL NO.	+34915552682
DATE OF BIRTH	27/04/1997	MOBILE	+34630088055
EMAIL	loreto.hagon@rfe golf.es		
EXACT H/CAP (eg 0.4)	+2.1	NATIONALITY (e.g. SCOTTISH)	SPANISH
HOME CLUB	LOMAS-BOSQUE		

- (a) I declare that I am/am not (delete as appropriate) within WORLD AMATEUR GOLF RANKING™ listing I-2000, see www.wagr.com
- (b) I declare that I have read and understood the Conditions for the Championship, including the requirements of the International Golf Federation's Anti-Doping Policy, that I conform to the Rules of Amateur Status in all respects and that all of the above information is correct to the best of my knowledge.

SIGNATURE  DATE 16/6/2014

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MASTERCARD ☐ VISA ☒ MAESTRO ☐ Card No 4546530240707967

Issue No / Start Date / Expiry Date 10/17

TO BE COMPLETED BY ENTRANT'S PARENT OR GUARDIAN

NAME		
ADDRESS if different from above		
RELATIONSHIP TO ENTRANT	ENTRANT'S DATE OF BIRTH	DDMMYYYY

I certify that the date of birth and all other information provided by the entrant is correct. I also confirm that I have read and understood the Conditions for the Championship, including the requirements of the International Golf Federation's Anti-Doping Policy.

SIGNATURE _____ DATE _____

TO BE COMPLETED BY THE SECRETARY OF THE HOME CLUB IF WITHIN GREAT BRITAIN & IRELAND

I hereby certify that the exact handicap (eg 0.4) of the entrant is . under the current CONGU handicapping system and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

SECRETARY'S SIGNATURE		
NAME AND ADDRESS OF CLUB		
TEL NO.		

TO BE COMPLETED ON BEHALF OF ENTRANTS FROM OUTSIDE GB & I

I hereby certify that the exact handicap (eg 0.4) of the entrant is +2.1 under the handicapping system adopted in the country from which he has entered and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

SIGNATURE 	POSITION	
NAME AND ADDRESS OF CERTIFYING AUTHORITY	R.F.E.G. c/ ARROYO DEL MONTE, N° 5, 28049 MADRID - SPAIN	
DATE	16/6/2014	

R&A Championships Limited will use the information you provide on this entry form to process your entrance to and participation in The Boys Amateur Championship. It may also be used by R&A Championships Limited to: (a) update the WORLD AMATEUR GOLF RANKING™, if relevant; and (b) provide you with information on Rule updates or similar information regarding the game of golf. R&A Championships Limited may share your information within the R&A group of companies for these purposes.

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TO BE COMPLETED BY ALL ENTRANTS

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For office use only

FIRST NAME	CARLOS	FAMILY NAME	LEANDRO
ADDRESS	RFE G c/ ARROYO DEL MONTE, N° 5		
CITY	MADRID		
COUNTRY	SPAIN		
POSTCODE	28049	TEL NO.	+34915552682
DATE OF BIRTH	29/01/1996	MOBILE	+34630088055
EMAIL	loreto.hagon@rfe golf.es		
EXACT H/CAP (eg 0.4)	+2.3	NATIONALITY (e.g. SCOTTISH)	SPANISH
HOME CLUB	BELLAVISTA		

- (a) I declare that I am/am not (delete as appropriate) within WORLD AMATEUR GOLF RANKING™ listing 1-2000, see www.wagr.com
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SIGNATURE  DATE 16/6/2014

The entry fee is £35 Credit/Debit card payment can be made or a cheque payable to R&A Championships Limited.

MASTERCARD ☐ VISA ☒ MAESTRO ☐ Card No 4546530240707967

Issue No / Start Date / Expiry Date 10/17

TO BE COMPLETED BY ENTRANT'S PARENT OR GUARDIAN

NAME

ADDRESS if different from above

RELATIONSHIP TO ENTRANT

ENTRANT'S DATE OF BIRTH DDMMYYYY

I certify that the date of birth and all other information provided by the entrant is correct. I also confirm that I have read and understood the Conditions for the Championship, including the requirements of the International Golf Federation's Anti-Doping Policy.

SIGNATURE

DATE

TO BE COMPLETED BY THE SECRETARY OF THE HOME CLUB IF WITHIN GREAT BRITAIN & IRELAND

I hereby certify that the exact handicap (eg 0.4) of the entrant is . under the current CONGU handicapping system and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

SECRETARY'S SIGNATURE

NAME AND ADDRESS OF CLUB

TEL NO.

TO BE COMPLETED ON BEHALF OF ENTRANTS FROM OUTSIDE GB & I

I hereby certify that the exact handicap (eg 0.4) of the entrant is +2.3 under the handicapping system adopted in the country from which he has entered and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

SIGNATURE  POSITION

NAME AND ADDRESS OF CERTIFYING AUTHORITY R.F.E.G. c/ ARROYO DEL MONTE, N° 5, MADRID - SPAIN

DATE 16/6/2014

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THE 2014 BOYS AMATEUR CHAMPIONSHIP

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For office use only

FIRST NAME	VICTOR	FAMILY NAME	GARCIA BROTO
ADDRESS	RFEG c/ ARROYO DEL MONTE, N° 5		
CITY	MADRID		
COUNTRY	SPAIN		
POSTCODE	28049	TEL NO.	+34915552682
DATE OF BIRTH	20041997	MOBILE	+34630088055
EMAIL	ldoretouhagon@rfegolf.es		
EXACT H/CAP (eg 0.4)	+1.3	CDH ID NO.	
NATIONALITY (e.g. SCOTTISH)	SPANISH		
HOME CLUB	EL PRAT		

- (a) I declare that I am/am not (delete as appropriate) within WORLD AMATEUR GOLF RANKING™ listing 1-2000, see www.wagr.com
- (b) I declare that I have read and understood the Conditions for the Championship, including the requirements of the International Golf Federation's Anti-Doping Policy, that I conform to the Rules of Amateur Status in all respects and that all of the above information is correct to the best of my knowledge.

SIGNATURE  DATE 16/6/2014.

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MASTERCARD ☐ VISA ☒ MAESTRO ☐ Card No 4546530240707967

Issue No / Start Date / Expiry Date 10/17

TO BE COMPLETED BY ENTRANT'S PARENT OR GUARDIAN

NAME

ADDRESS if different from above

RELATIONSHIP TO ENTRANT

ENTRANT'S DATE OF BIRTH DDMMYYYY

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SIGNATURE

DATE

TO BE COMPLETED BY THE SECRETARY OF THE HOME CLUB IF WITHIN GREAT BRITAIN & IRELAND

I hereby certify that the exact handicap (eg 0.4) of the entrant is . under the current CONGU handicapping system and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

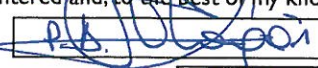
SECRETARY'S SIGNATURE

NAME AND ADDRESS OF CLUB

TEL NO.

TO BE COMPLETED ON BEHALF OF ENTRANTS FROM OUTSIDE GB & I

I hereby certify that the exact handicap (eg 0.4) of the entrant is +1.3 under the handicapping system adopted in the country from which he has entered and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

SIGNATURE  POSITION

NAME AND ADDRESS OF CERTIFYING AUTHORITY

R.F.E.G. c/ ARROYO DEL MONTE, N° 5, 28049 MADRID - SPAIN

DATE 16/6/2014.

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For office use only

FIRST NAME	P A B L O	FAMILY NAME	R O D R I G U E Z - T A B E R N E R O
ADDRESS	R F E G c / A R R O Y O D E L M O N T E , N ° 5		
CITY	M A D R I D		
COUNTRY	S P A I N		
POSTCODE	2 8 0 4 9	TEL NO.	+ 3 4 9 1 5 5 5 2 6 8 2
DATE OF BIRTH	2 9 / 1 0 / 1 9 9 7	MOBILE	+ 3 4 6 3 0 0 8 8 0 5 5
EMAIL	l o r e t o u h a g o n @ r f e g o l f . e s		
EXACT H/CAP (eg 0.4)	+1.0	CDH ID NO.	NATIONALITY (e.g. SCOTTISH)
HOME CLUB	S E V I L L A		

- (a) I declare that I am/am not (delete as appropriate) within WORLD AMATEUR GOLF RANKING™ listing 1-2000, see www.wagr.com
- (b) I declare that I have read and understood the Conditions for the Championship, including the requirements of the International Golf Federation's Anti-Doping Policy, that I conform to the Rules of Amateur Status in all respects and that all of the above information is correct to the best of my knowledge.

SIGNATURE  DATE 16/6/2014.

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MASTERCARD ☐ VISA ☒ MAESTRO ☐ Card No 4 5 4 6 5 3 0 2 4 0 7 0 7 9 6 7

Issue No / Start Date / Expiry Date 10 / 17

TO BE COMPLETED BY ENTRANT'S PARENT OR GUARDIAN

NAME

ADDRESS if different from above

RELATIONSHIP TO ENTRANT

ENTRANT'S DATE OF BIRTH

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SIGNATURE

DATE

TO BE COMPLETED BY THE SECRETARY OF THE HOME CLUB IF WITHIN GREAT BRITAIN & IRELAND

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SECRETARY'S SIGNATURE

NAME AND ADDRESS OF CLUB

TEL NO.

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SIGNATURE  POSITION

NAME AND ADDRESS OF CERTIFYING AUTHORITY

DATE

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THE 2014 BOYS AMATEUR CHAMPIONSHIP

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For office use only

FIRST NAME	XABIER	FAMILY NAME	GORDSPE
ADDRESS	RFE G c/ ARROYO DEL MONTE, N° 5		
CITY	MADRID		
COUNTRY	SPAIN		
POSTCODE	28049	TEL NO.	+34915552682
DATE OF BIRTH	29/2/1997	MOBILE	+34630088055
EMAIL	ldoretouhagon@rfe golf.es		
EXACT H/CAP (eg 0.4)	+2.8	NATIONALITY (e.g. SCOTTISH)	SPANISH
HOME CLUB	BASOZABAL		

- (a) I declare that I am/am not (delete as appropriate) within WORLD AMATEUR GOLF RANKING™ listing 1-2000, see www.wagr.com
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SIGNATURE  DATE 16/6/2014.

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Issue No / Start Date / Expiry Date 10/17

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NAME

ADDRESS if different from above

RELATIONSHIP TO ENTRANT

ENTRANT'S DATE OF BIRTH DDMMYYYY

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SIGNATURE

DATE

TO BE COMPLETED BY THE SECRETARY OF THE HOME CLUB IF WITHIN GREAT BRITAIN & IRELAND

I hereby certify that the exact handicap (eg 0.4) of the entrant is . under the current CONGU handicapping system and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

SECRETARY'S SIGNATURE

NAME AND ADDRESS OF CLUB

TEL NO.

TO BE COMPLETED ON BEHALF OF ENTRANTS FROM OUTSIDE GB & I

I hereby certify that the exact handicap (eg 0.4) of the entrant is +2.8 under the handicapping system adopted in the country from which he has entered and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

SIGNATURE  POSITION

NAME AND ADDRESS OF CERTIFYING AUTHORITY R.F.E.G. c/ ARROYO DEL MONTE, N° 5 MADRID - SPAIN

DATE 16/6/2014.

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THE 2014 BOYS AMATEUR CHAMPIONSHIP

TO BE COMPLETED BY ALL ENTRANTS

Please complete all relevant areas in BLOCK CAPITALS and return with entry fee to the address below.

For office use only

FIRST NAME	J O R G E	FAMILY NAME	E D D
ADDRESS	R F E G c / A R R O Y O D E L M O N T E , N º 5		
CITY	M A D R I D		
COUNTRY	S P A I N		
POSTCODE	2 8 0 4 9		
TEL NO.	+ 3 4 9 1 5 5 5 2 6 8 2		
DATE OF BIRTH	1 1 0 7 1 9 9 7		
MOBILE	+ 3 4 6 3 0 0 8 8 0 5 5		
EMAIL	l o r e t o u h a g o n a r f e g o l f . e s		
EXACT H/CAP (eg 0.4)	+0.2	CDH ID NO.	NATIONALITY (e.g. SCOTTISH)
HOME CLUB	M A N I S E S		

- (a) I declare that I am/am not (delete as appropriate) within WORLD AMATEUR GOLF RANKING™ listing 1-2000, see www.wagr.com
- (b) I declare that I have read and understood the Conditions for the Championship, including the requirements of the International Golf Federation's Anti-Doping Policy, that I conform to the Rules of Amateur Status in all respects and that all of the above information is correct to the best of my knowledge.

SIGNATURE  DATE 16/6/2014.

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MASTERCARD ☐ VISA ☒ MAESTRO ☐ Card No 4 5 4 6 5 3 0 2 4 0 7 0 7 9 6 7

Issue No / Start Date / Expiry Date 10/17

TO BE COMPLETED BY ENTRANT'S PARENT OR GUARDIAN

NAME

ADDRESS if different from above

RELATIONSHIP TO ENTRANT

ENTRANT'S DATE OF BIRTH

I certify that the date of birth and all other information provided by the entrant is correct. I also confirm that I have read and understood the Conditions for the Championship, including the requirements of the International Golf Federation's Anti-Doping Policy.

SIGNATURE

DATE

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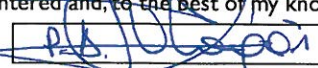
SECRETARY'S SIGNATURE

NAME AND ADDRESS OF CLUB

TEL NO.

TO BE COMPLETED ON BEHALF OF ENTRANTS FROM OUTSIDE GB & I

I hereby certify that the exact handicap (eg 0.4) of the entrant is +0.2 under the handicapping system adopted in the country from which he has entered and, to the best of my knowledge and belief, he is an amateur golfer in accordance with the Rules of Amateur Status.

SIGNATURE  POSITION

NAME AND ADDRESS OF CERTIFYING AUTHORITY

R.F.E.G. c/ ARROYO DEL MONTE 5 28049 MADRID - SPAIN

DATE 16/6/2014.

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