2019 BIGGA WENTWORTH SUPPORT TEAM

Wentworth Club | 19–22 September 2019 | Application Form

Personal Details						
Name:	BIGGA Membership No: Age:					
Golf Club:	Position:					
Home Address:	Postcode:					
Email:						
Contact Telephone:	Twitter handle: @					
There are two options to volunteer, please indicate your choices l	pelow by ticking the relevant boxes					
Option 1: I wish to volunteer for the early morning and evening preparation team						
I will be available from 4pm Sunday 15 September to Sunday 22 September 2019						
I also wish to volunteer to rake bunkers for a match on:	Saturday Sunda	ay				
NOTE: Accommodation is only provided for the preparation team						
Option 2: I wish to volunteer to be part of the bunker raking team						
I will be available from Thursday 19 September to Sunday 22 September 2019						
Please indicate, by ticking the boxes which days you are available to volunteer	Thursday Friday Saturday Sunda	ау				
I understand that preference will be given to members who are available on all four days						
I understand that accommodation will NOT be provided						
Skills & Experience:						
	Yes N	No				
I have been a BIGGA member for more than three years						
I serve, or have served in the last three years on a Section/Region Committee						
I am CPD active/approved						

Please give details of any	other previous volunteer sup	oport team work:		
Date:	Tournament:		Duties carried out:	
What do you hope to achi	ieve by being part of the sup	port team?		
Uniform Sizes (If selected)):			
Polo shirt measurements (t	ick):	M L	XL XXL	XXXL
Support Team members mu	the Support Team will be pro st provide their own footwear erproofs. All visible tattoos m	(golf shoes or smart trainers	s) and smart trousers (either l	olack or dark
Medical Conditions: Please	note a form will be sent out to	o successful applicants for d	isclosure of medical	

Medical Conditions: Please note a form will be sent out to successful applicants for disclosure of medical conditions, next of kin etc. Information shared will only be disclosed to medical professionals as required and will be destroyed within seven days of the event ending.

Before applying please ensure that you are available to volunteer on the dates you have indicated. If accepted, and you need to withdraw due to unforeseen circumstances, it is imperative you contact us as soon as possible as finding a replacement can be extremely difficult.

Note: A place on the team is open to all full BIGGA members but priority is given to the more active members. Subject to the availability of sufficient numbers of experienced team members no regular team member will be selected for more than three teams in succession. A limited number of places will be made available to younger members and overseas members.

To apply please fill in the application form and send to: Rachael Duffy, BIGGA House, Aldwark, Alne, York YO611UF by Tuesday 30 April 2019. You will be notified by the end of May if you have been successful.

