



# Hole in One

Enquiry form

Fill out the details below to receive your contract and warranties for your event.

## IMPORTANT INFORMATION ABOUT YOU

Sponsors Name:

Sponsors Address:

Sponsors Phone:

Fax:

Contact:

Golf Club Where tournament Held:

Event Name:

Event Date:

Number of Holes to be indemnified:

Hole Number:

Distance in Metres of Each Hole (Minimum Distance 125 Metres):

1.

2.

3.

Prize Value for Each Hole:

1.

2.

3.

Number of Players

Amateur:

Professional:

## DECLARATION

**I/We declare that: a)** The information I/We have given is true and complete to the best of my/our knowledge and belief. **b)** I/We understand that the proposal forms the basis of the contract between me/us and the Insurers.

Signature:

Date:

EMAIL OR FAX (09 270 6023) TO ODDS ON PROMOTIONS

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