## ENTRY FORM "CAPE KALIAKRA OPEN 2015"

(18, 19, 20 June 2015)



Surname:		
		Handicap:
Phone number:	E-mail address:	
Club:	Country:	
Planned coming time (not la	ater than 19:30 local time	of 17.06.2015):
Participant in the club:	Size of clothes (S, M, L, XL, XXL):	
I am coming earlier and wo	uld like to play on other co	ourses during the following dates:,
on course (reservation):		
On the official supper I 'd p	refer (meat, fish):	
Special demands, notices a	nd suggestions (class of t	he hotel room, buggy reservation, spa reserva-
tion and etc.)		
Retinue (people):	(	Retinue charge for the Closing Ceremony and
Prize-Giving party: 30 euro	/person)	
Date:		Sign:
(Please, fill the lines fully and	d clearly)	

## **ATTENTION**

THE OBLIGATORY CONDITION FOR PARTICIPATION IN THE TOURNAMENT IS ACCOMMODATIONS IN ONE OF THE THREE GOLF CLUBS!

APPLICANTION IS VALID ONLY AFTER GETTING THE PAYMENT.

NOTIFICATION WITH THE CONFIRMATION ABOUT TRANSFERRING MONEY TO THE SETTLEMENT ACCOUNT OF THE ORGANIZATOR WILL BE SENT TO THE PLAYER BY E-MAIL.

Details of payment:

**Account Number:** 

BGN: BG05RZBB91551004186662 EUR: BG58RZBB91551004186678 USD: BG73RZBB91551004186699 Payee's bank: Raiffeisen Bank:

SWIFT code: RZBBBGSF, Bank address: Raiffeisen Bank, Bulgaria,

9650 Kavarna, 30, Dobrotitza Str. (client № C98480)



Kaliakra Golf Foundation, Address: Bulgaria, Dobrich region, 9000 Balchik Municipality, Street: 5 km after Balchik on E87 road, complex Lighthouse Golf & Spa Resort, quarter Lake, Nº61, Fondacia Kaliakra Golf; e-mail: kaliakragolf@abv.bg www.kaliakragolf.com, tel.: +359 8849 19 654