## **CUMBRIA LADIES COUNTY GOLF ASSOCIATION** INTER CLUB MATCH PLAY **SILVER HANDICAP LEAGUE 2025**

| Home Club:<br>Tel No:<br>Team Captain: |                |                            | Away club: Tel No: Team Captain: Tel No: Ladies Secretary: Tel No: |  |  |  |  |                                     |  |  |        |        |                   |                |                            |        |
|--|----------------|----------------------------|--|--|--|--|--|-------------------------------------|--|--|--------|--------|-------------------|----------------|----------------------------|--------|
|  |                |                            |  |  |  |  |  | Tel No:  Ladies Secretary:  Tel No: |  |  |        |        |                   |                |                            |        |
| Date.                                  |                |                            |  |  |  |  |  |                                     |  |  |        |        | Time.             |                |                            |        |
| Home Team Players                      | H/cap<br>Index | Rounded<br>Course<br>H'cap |  |  |  |  |  |                                     |  |  |        | Result | Away Team Players | H/cap<br>Index | Rounded<br>Course<br>H'cap | Result |
|  |                | •                          |  |  |  |  |  |                                     |  |  | 11 000 |        |                   |                |                            |        |
|  |                |                            |  |  |  |  |  |                                     |  |  |        |        |                   |                |                            |        |
|  |                |                            |  |  |  |  |  |                                     |  |  |        |        |                   |                |                            |        |
|  |                |                            |  |  |  |  |  |                                     |  |  |        |        |                   |                |                            |        |
|  |                |                            |  |  |  |  |  |                                     |  |  |        |        |                   |                |                            |        |
| Team Totals                            |                |                            |  |  |  |  |  |                                     |  |  |        |        |                   |                |                            |        |

Stroke Allowance, full handicap difference in accordance with WHS regulations

| Winning Team: |        |              | Score: |              |
|---------------|--------|--------------|--------|--------------|
| Date:         | Signed | Home Captain | Signed | Away Captain |

The Home Club should return the result on this form to the Silver Handicap League Secretary as soon as possible after each match. All matches must be played by 31st August.

To:- Mrs Linda Young, Haybarrow, Greystoke Gill, Penrith, Cumbria CA11 0UQ

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Email: younglinda534@gmail.com

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