



HILLINGDON
LONDON

**Uxbridge Public Golf Course
Society Booking Form**

SOCIETY DETAILS

Society Name:	Society Date:	No of players:
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GOLF REQUIREMENTS

No of Holes:	Preferred Tee Time(s): _____ AM _____ PM	
No of Club sets: _____ Left handed _____ Right handed	No of markers: _____ Longest Drive _____ Nearest the Pin	No of Buggies:
Special Requirements:		

ORGANISERS DETAILS

Name:	Address:
	Postcode:
Tel No:	Email Address:

How did you hear about Uxbridge Public Golf Course? _____

Signature: _____ Date: _____

Note: In signing the booking form, you agree to London Borough of Hillingdon Golf Society Terms and Conditions.

London Borough of Hillingdon
Golf Hillingdon
Uxbridge Public Golf Course
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www.hillingdon.gov.uk/golf