

RULES

NAGA RULES FOR AMPUTEES WILL APPLY

The tournament will be conducted under the rules of the U.S.G.A. with such exceptions as are announced by the Tournament Committee. Any decisions made by the committee will be final. Pairings committee will have authority to adjust handicaps if deemed necessary. U.S.G.A. approved range finders are permitted.

Dress Code

No Blue jeans, cut-offs, or short shorts will be permitted. All shorts must be Bermuda length. Shirts must have collars.

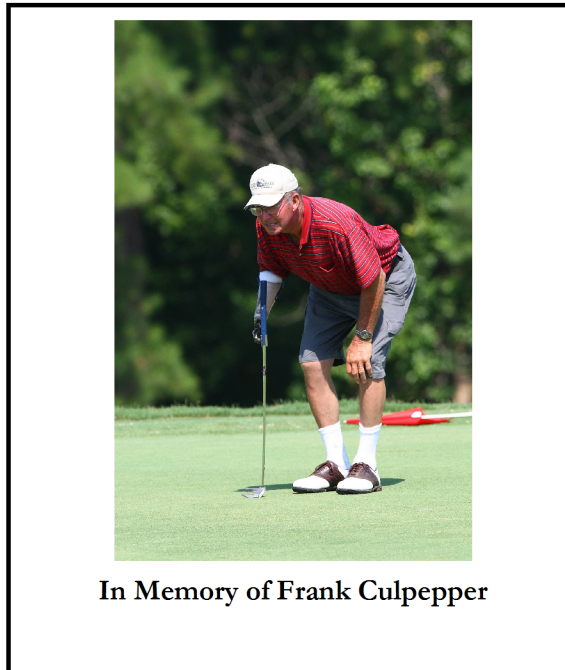
The Georgia State Amputee Golf Tournament would like to thank all of our past years players and sponsors. Your support throughout the past 30 years through your participation and your sponsorships are greatly appreciated and make it possible for us to put on the Ray Rice Sr. Memorial for this our 31st year.

We appreciate all of last years participants, whether you were an amputee, guest or sponsor, and we hope to see all of you back again for our 2024 event to be held again at The Club at Lake Sinclair.

If you know of an amputee golfer who might be interested in playing, please pass this information on to them.



In Memory of Keith Owens



In Memory of Frank Culpepper

Amputee Advisory Committee

Leroy Douthit
Jim Young
Tom Gilmore

Thirty-First Annual Georgia State Amputee Golf Tournament

July 12th, 13th & 14th
2024



In Memory of Grant Rice

Ray Rice Sr. Memorial

**The Club
At
Lake Sinclair**

3700 Sinclair Dam RD NE
Milledgeville, GA 31061
(478) 452-3525

GA STATE AMPUTEE GOLF TOURNAMENT

SCHEDULE OF EVENTS

FRIDAY JULY 12th

- 11:30 Check-In Driving Range Open
Free Range Balls
Lunch will be served
- 12:30 Four Person Scramble-Shotgun Start
- 5:30 Cocktail Party

SATURDAY JULY 13th

- 8:00 Check-In Driving Range Open
Free Range Balls
- 8:30 Tournament-Shot Gun Start
- 11:30 Lunch will be served
- 7:00 Dinner Banquet-Cash Bar

SUNDAY JULY 14th

- 8:00 Check-In Driving Range Open
Free Range Balls
- 8:30 Tournament-Shotgun Start
- 1:00 Lunch will be served
Awards Presentations

If you would like to play with a specific person, please let us know and we will try to honor your request. Please list persons name and day of play.

Please list any dietary restrictions or allergies

RULES FOR SCHOLARSHIP

Must be an amputee or an immediate family member of an amputee participant in the Georgia State Amputee Golf Tournament.

Must be a high school graduate and submit a copy of his or her diploma. Must be enrolled in an accredited Technical School or College or provide a letter of proof of acceptance.

Mail short biography and statement as to why you believe that you deserve this scholarship to:

GA Amputee Golf Scholarship Fund
P. O. Box 343 Milledgeville, GA 31059

ENTRY FORM FOR GUEST ONLY

Please check day(s) you will be attending

_____ Friday \$70.00 each includes Cart and Green Fees, Lunch, Prizes, Cocktail Party

_____ Saturday \$65.00 each includes Cart and Green Fees, Lunch

_____ Sunday \$65.00 each includes Cart and Green Fees, Lunch

_____ Banquet Ticket \$30.00 each

_____ Child's Dinner Plate \$8.00 each (under 12)

Name: _____

Address: _____

City, State, Zip: _____

Handicap: _____ Email _____

All entry forms must be in by June 28th
Make checks payable to:

GA Amputee Golf Tournament
Mail completed form with check or money order to:
GA Amputee Golf Tournament
P.O. Box 343 Milledgeville, GA 31059

For Questions call Bill Eason @ 478-456-5632
E-Mail dbme@windstream.net

ENTRY FORM FOR AMPUTEE

\$200.00 Entry Fee Includes:

Cart and Green Fees for Friday, Saturday and Sunday; Cocktail Party and Prizes; Lunch on Friday, Saturday and Sunday; One Banquet Ticket.

Please indicate which days you will be playing.

_____ Friday _____ Saturday _____ Sunday
_____ Extra Banquets Ticket \$30.00 ea.
_____ Child's Dinner Plate \$8.00 ea. (under12)

Practice Rounds

Based on Availability

Please call Head Golf Pro Dan Elliot at 478-452-3220 for tee time and green fee.

Name: _____

Address: _____

City, State, Zip: _____

Email _____

Handicap: _____ GHIN Index # _____

All entry forms must be in by June 24th.

Make checks payable to:

GA Amputee Golf Tournament

Mail completed form with check or money order to:

GA Amputee Golf Tournament

P.O. Box 343 Milledgeville, GA 31059

HOTEL ACCOMODATIONS

Fairfield Inn & Suites
2631-A North Columbia St.
478-452-5202
Rate \$109 per night

Holiday Inn Express
2600 N Columbia Street
(478) 295-1144
Rate \$109 per night

Reservations must be made by June 27th for rate guarantee. Be sure to mention Georgia Amputee Golf Tournament to receive above rates.