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**Level 4 - Individual Stroke Play**

**BACKSWING CONFERENCE GOLF QUALIFIER**

STRATFORD, ONTARIO

**TUESDAY, SEPTEMBER 17th, 2024  
TEE TIMES: 1:00 – 3:00**

**Stratford Municipal Golf Course**

**[251 Norfolk Street, Stratford](https://www.google.com/maps/place/Stratford+Municipal+Golf+Course/@43.359923,-80.967167,2411m/data=!3m1!1e3!4m6!3m5!1s0x882eae0a9f7ee05f:0xd0ad8bb98f0902b1!8m2!3d43.359923!4d-80.967167!16s%2Fg%2F1vntkjlr?hl=en&entry=ttu)**

Individual Stroke Play for 9 Holes

COST: $26 (paid directly to Stratford Golf Course)

**DEADLINE FOR REGISTRATION:**

**September 3rd, 2024**

**Please include your 3 Scorecards along with registration**

Tee Times begin at 1:00 p.m.

Please be on time!!

No lunch will be provided.

Food is available at your cost in the clubhouse.

QUESTIONS?

**Jarrod Copland**  [jarrodc@specialolympicsontario.com](mailto:jarrodc@specialolympicsontario.com)

**Basic Rules**

**Level 4 Individual Stroke**

**Competition:**

* First Tee Time will be at 1:00pm. Please arrive early so that athletes can prepare and their caddies who want power carts can make arrangements at the clubhouse to rent one. Athletes will be ferried out to their respective starting holes. BE ON TIME.
* Starting blocks are black for men and red for the ladies. Note hole #8 has an advanced tee area for both.
* Individual stroke play for nine holes will be the competition format. Maximum shots per hole is 10 strokes. If a 10th stroke is played without holing the shot, the player shall record a score of 10X and proceed to the next hole.
* **Penalty shots**. We have revised the rules to be in line with the updated local rules for golf. In order to ensure a steady pace of play, the following rules will be adopted**:**
* Out of bounds - **Local rule in effect** to allow golfers the option to drop the ball in the vicinity of where the ball is lost or **out of bounds** (including the nearest fairway area), under a two-stroke penalty.
  + **Lateral hazard rule – the fescue on the golf course will play as a lateral hazard. The player can hit out of the fescue or take a one stroke penalty and drop the ball a maximum of 2 club lengths from the entry point**
  + **Any unplayable lies will count a 1 stroke penalty allowing the player to drop the ball 2 club lengths from the spot in question but not nearer the hole.**
* A limited number of pull carts are available at the golf course. Athletes are **strongly encouraged to bring their own pull carts**
* The use of power carts will only be permitted, at the athlete’s cost, for athletes with mobility issues. A volunteer will be provided for that cart.
* **Golfers are encouraged to bring caddies.**
* The athletes are expected to transport their own clubs.
* Forecaddies (volunteers) will be placed at strategic parts of the golf course to assist with location of golf balls and ensure pace of play
* Caddies do not require a SOO ID # but will be asked to sign a waiver to play.

**Backswing Conference Qualifier**

**TUESDAY, SEPTEMBER 17th, 2024**

**Athlete/Coach/Caddies Registration**

**SKILL LEVEL - In order to help us assign the golfer to his/her foursome, please provide the skill level of the athlete: Good, Fair, Needs Work. This will help keep a regular pace to the game.**

EMERGENCY PHONE NUMBER IN CASE OF CANCELLATION ETC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Community Name: | | | | | | | |
| **Head Coach:** | | | | | **SOO ID #** | | |
| **Phone:** | | | | | **Fax:** | | |
| **Email address:** | | | | | | | |
| **Mailing address:** | | | | | | | |
| **City:** | | | | **Postal Code:** | | | |
| **Assistant Head Coach:** | | | **SOO #:** | | | | |
| **Athletes (please advise if male or female)** |  | **Athlete Name:** | **SOO ID #** | | | **Skill Level (Good, fair, Needs work)** | **Caddie Name** |
| **1** |  |  | | |  |  |
| **2** |  |  | | |  |  |
| **3** |  |  | | |  |  |
| **4** |  |  | | |  |  |
| **5** |  |  | | |  |  |
| **6** |  |  | | |  |  |
| **7** |  |  | | |  |  |
| **8** |  |  | | |  |  |
| **9** |  |  | | |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Caddies/coaches** |  | **Caddie/Coach/Volunteer Name:** | **SOO #:** |
| **1** |  |  |
| **2** |  |  |
| **3** |  |  |
| **4** |  |  |
| **5** |  |  |
| **6** |  |  |
| **7** |  |  |
| **8** |  |  |
| **9** |  |  |

\*\*\***ANY athlete without proper SOO registration number**

**cannot and will not be allowed to participate.**\*\*\*

**DEADLINE is September 3rd, 2024**

**RETURN** **TO: Jarrod Copland**

[**jarrodc@specialolympicsontario.com**](mailto:jarrodc@specialolympicsontario.com)