BUENAVENTURA SENIOR MEN'S GOLF CLUB
HOLE-IN-ONE VERIFICATION FORM

Complete this form and submit it to the Tournament Committee or Club Officer.

PLAYER AND EVENT INFORMATION

Player Name: _____	**GHIN Number:** _____
Date of Hole-in-One: _____	**Time of Hole-in-One:** _____
Golf Course: _____	**Tournament / Weekly Play:** _____
Hole Number: _____	**Yardage Played:** _____
Club Used: _____	**Ball Brand / Model:** _____

DESCRIPTION OF THE SHOT

Playing Group / Starting Tee: _____

Brief description or special circumstances (optional):

WITNESS CERTIFICATION

We certify that we personally witnessed the above-named player make a hole-in-one on the hole listed above.

Witness Name (Printed)	Witness Signature	Date

Player Certification: I certify that the information above is true and correct.

Player Signature	Date	Telephone / Email

FOR CLUB USE ONLY

Verified By / Signature: _____	**Club Position / Award Issued:** _____	**Date Verified:** _____