



beanie
FOR
BRAIN CANCER

Charity GOLF DAY



JOIN US FOR OUR
MHF BEANIES FOR BRAIN
CANCER CHARITY GOLF DAY

FRIDAY 19 JUNE 2026



MARK HUGHES
FOUNDATION

CARNARVON GOLF CLUB
65-95 NOTTINGHILL RD
LIDCOMBE NSW 2141

REGISTER NOW





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FOR
BRAIN CANCER



Charity GOLF DAY 2026



NSW CHARITY GOLF DAY



DETAILS

CARNARVON GOLF CLUB

65-95 NOTTINGHILL RD, LIDCOMBE, NSW 2141

FRIDAY 19 JUNE 2026

AMBROSE (4 PERSON)

MUST HAVE A GA HANDICAP* (SPONSORS EXEMPT)

6.45AM REGISTRATION

(MUST REGISTER 30 MINUTES PRIOR TO TEE TIME)

8AM SHOTGUN START

1PM LUNCH & PRESENTATION

REGISTRATIONS CLOSE 6 JUNE 2026

SPONSORSHIP PACKAGES

SPONSORSHIP PACKAGES ARE AVAILABLE.

VISIT WWW.CARNARVONGOLF.COM.AU FOR FURTHER DETAILS

TICKETS

TEAM PACKAGE \$560 PER TEAM (4 PLAYERS)

INCLUDES 18 HOLES OF GOLF, MHF BEANIE, BREAKFAST ON ARRIVAL, BUFFET LUNCH, PRIZES AWARDED & LUCKY DOOR ENTRY

INDIVIDUAL PLAYER \$150 PER PERSON

INCLUDES 18 HOLES OF GOLF, MHF BEANIE, BREAKFAST ON ARRIVAL, BUFFET LUNCH, PRIZES AWARDED & LUCKY DOOR ENTRY

LUNCH ONLY \$90PP

INCLUDES BUFFET LUNCH, MHF BEANIE & LUCKY DOOR ENTRY

COMPETITION PRIZES

NEAREST THE PIN & LONGEST DRIVE

SCRATCH WINNER, RUNNER UP & THIRD PLACE

NETT WINNER, RUNNER UP & THIRD PLACE

PARTEE PAR 3 - PURCHASE A TEE SHOT FROM THE PRO!

\$20 PER TEAM WITH PROCEEDS DONATED TO CHARITY

ENQUIRIES

DANIELLE TREVENA

02 9649 6255

DANIELLE@CARNARVONGOLF.COM.AU

REGISTRATION FORM

BUSINESS OR TEAM NAME _____

CONTACT PERSON _____

PHONE NO. _____

EMAIL _____

SPONSORSHIP PACKAGE _____



1. PLAYER NAME

GOLF ID

GA HANDICAP

EMAIL

PHONE NO.

2. PLAYER NAME

GOLF ID

GA HANDICAP

EMAIL

PHONE NO.

3. PLAYER NAME

GOLF ID

GA HANDICAP

EMAIL

PHONE NO.

4. PLAYER NAME

GOLF ID

GA HANDICAP

EMAIL

PHONE NO.

LUNCH GUESTS (ADDITIONAL GUESTS ARE WELCOME)

5. NAME

PHONE NO.

6. NAME

PHONE NO.

CREDIT CARD DETAILS: (MASTERCARD / VISA / AMEX): (A credit card surcharge applies)

NAME ON CARD

CARD NUMBER

EXPIRY DATE

DIRECT DEPOSIT DETAILS

ACCOUNT NAME: Carnarvon Golf Club Ltd

BSB: 082-124 **A/C#:** 45702 9700

NOTE: Please include Surname as reference and email remittance to: danielle@carnarvongolf.com.au

SIGNATURE

OFFICE USE

**AMOUNT RECEIVED
(CCARD / EFT)**

RECEIPT DATE

REGISTERED