



**SOUTH CAROLINA GOLF ASSOCIATION**  
**MEMBERS**  
**HOLE-IN-ONE INFORMATION**

Player's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Club: \_\_\_\_\_ GHIN #: \_\_\_\_\_

Course at which  
Hole-in-One was made: \_\_\_\_\_

Date of Hole-in-One: \_\_\_\_\_

Hole #: \_\_\_\_\_ Hole Length: \_\_\_\_\_

Witnessed By: \_\_\_\_\_

**(Please Print)**

\_\_\_\_\_  
\_\_\_\_\_

Player's Signature: \_\_\_\_\_

Manager/  
Head Professional Signature: \_\_\_\_\_

Congratulations on your recent accomplishment. We will be sending you a Hole-in-One Certificate. Please complete the above information with the proper signatures and **enclose a copy of the scorecard signed and attested.**

Mail: SCGA Hole-in-One, P.O. Box 286, Irmo, SC 29063

E-Mail: [info@scgolf.org](mailto:info@scgolf.org)