AHS1 HANDICAP CHANGES REPORT FORM

Use this form to report:

- ***a) automatic changes to Handicaps and Indices of all players in an Event; and***
- ***b) non-automatic changes of handicaps in an event or by Club Handicapper***

When completing the form, please:

- **a)** ***enter players' details – ACA ID – Surname, First name –Start H/cap- Finish H/cap- Start Index - Finish Index***
- **b)** ***use BLOCK CAPITALS throughout.***
- **c)** ***place an asterisk (*) by a player's name if the handicap change is non-automatic.***

Event: State……VIC. Date:

Event Handicapper please record a players H/cap and Index at the start and end of the Event

			HANDICAP		INDEX	
ACA	**NAME**	**Club**	**Start**	**Finish**	**Start**	**Finish**

Event Manager/Handicapper……..Sheet: ….of …….

Please send immediately, to:-

State Handicap Recorder: -

Ian McKee,

PO Box 359 W Ballarat West Vic 3350

Or email to: handicaprecorder@croquetvic.asn.au