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# 1964 CLUB

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President - Chris Grayling MP

**7 Longdown Road**

**Epsom**

**Surrey KT17 3PT**

[johnwpearl@hotmail.com](mailto:johnwpearl@hotmail.com)

**1<sup>st</sup> March 2015**

Dear Member,

**1964 CLUB SPRING GOLF – THURSDAY 30<sup>th</sup> April 2015 - RAC**

The Spring Golf Meeting of the 1964 Club will take place at the Royal Automobile Club on Thursday 30<sup>th</sup> April 2015. This year we shall be playing on the Coronation Course and all golfers are most welcome. In addition to the Ladies' and Gentlemen's individual trophies a team competition will be organised.

The Ladies will be teeing off from 12.28 pm followed by the Gentlemen. Please state if you have any preference for tee times. For those who would like a sandwich and a drink please meet in the 19<sup>th</sup> bar from 11.30 am. If you wish to know your tee time please contact one of us a day or two before the event.

For non-golf pass holders, please pay your green fee at the Pro Shop prior to playing. Also, if you require a buggy please make the necessary arrangements directly with the Pro Shop.

In the evening we shall meet for drinks in the Members Bar from 6.30 pm (cash bar) and dinner will be served at 7.15pm. in the Derby Room. Please indicate your choice from the menu on the attached form. Non-golfing ladies and gentlemen will be most welcome. The dress code for gentlemen is jacket & tie.

A set meal will be served at a cost of £36.00 per person. Please state on the reply slip if you have special dietary requirements.

A list of total costs (golf prizes, meal, wine) will be sent to all attendees a few days after the event.

Please e-mail John Pearl (address as above) or complete the form below and return it to him no later than Tuesday 21st April. Please note that late cancellations will incur a charge.

We do hope that you will be able to join us and look forward to another enjoyable event.

Yours sincerely,

**Pat Morrish/John Pearl**

**1964 CLUB SPRING GOLF - THURSDAY 30<sup>th</sup> APRIL 2015**

**GOLF**      **Yes/No \***      Names .....

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**HANDICAPS**

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**TEE OFF TIME**                      **Early/Late/Don't mind**                      \*

**DINNER**      **Yes/No \***      Names .....

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**MENU SELECTION** Please tick selected Items                      Names .....

<b>Starter</b>	Poached tiger prawns, lemon mayonnaise, asparagus and baby leaves	<input type="checkbox"/>	<input type="checkbox"/>
	Cheddar cheese, bacon, sweet onion and chive tart, herb salad	<input type="checkbox"/>	<input type="checkbox"/>
<b>Main</b>	Fillet of pan seared sea bass, roasted Mediterranean Vegetables and basil vinaigrette	<input type="checkbox"/>	<input type="checkbox"/>
	Medallions of salt marsh lamb, dauphinoise potato, panache of beans, roasted garlic jus	<input type="checkbox"/>	<input type="checkbox"/>
<b>Dessert</b>	Apple tatin, cinnamon ice cream, Calvados sauce	<input type="checkbox"/>	<input type="checkbox"/>
	Carpaccio of pineapple and mango with yogurt sorbet	<input type="checkbox"/>	<input type="checkbox"/>
	Cheese & biscuits	<input type="checkbox"/>	<input type="checkbox"/>

**SPECIAL DIETARY REQUIREMENTS**

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Please return to JOHN PEARL at the above address or e-mail no later than **Tuesday 21<sup>st</sup> April 2014**

\* Please delete as appropriate