



# PPGA Fall Classic

Friday, October 3, 2025  
Jeffersonville GC



**Eligibility:** Entries are open to all amateur golfers, regardless of handicap or Golf Club. Entries are subject to approval or rejection anytime (either before or during the Championship) by the PPGA Championship Committee. The Committee decisions shall be final in all rulings. To be eligible to compete in the senior division both players must be 50 years of age or older (super senior 60 years of age or older) on or before tournament date.

**Exemptions:** Jake Fazio & Brian Isztwan, 2024 Champions, Robert Amen & Joe Schorn, 2024 Senior Champions

**Entrance Fees:** The entry fee is \$160.00 per team, which **includes greens fees**. Walking is permitted. No refunds will be granted for cancellations received after the closing date.

**Entries close September 23, 2025 in the association office. No entries will be accepted after the deadline.**

**Pairings and Starting Times:** All contestants should check-in at their starting tee 10 minutes before their tee-time. A contestant who has not canceled his entry by written or verbal notification to the association office may be subject to disqualification for this event and subsequent events of the association. Tee-times will be posted to the website [www.phillypublinks.com](http://www.phillypublinks.com) and contestants will be notified by e-mail one week prior to the event.

**Competition:** The PPGA Fall Classic will be played over 18 holes. The first six holes are in scramble format, the middle six holes are better-ball of partners and the last six are select drive alternate shot. The lowest 18-hole score wins.

**In the event of a tie for the lowest score, a sudden-death playoff will be held following the conclusion of play.** All other ties will be broken by the USGA method.

**Awards Presentation:** Gift Certificates will be awarded depending on the size of the field.

**Name:** \_\_\_\_\_ **Approx. Handicap:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Email:** \_\_\_\_\_ **Course Affiliation (if any):** \_\_\_\_\_  
**Daytime Phone Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Partners Name:** \_\_\_\_\_ **Approx. Handicap:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Email:** \_\_\_\_\_ **Course Affiliation (if any):** \_\_\_\_\_  
**Daytime Phone Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Amateur Status:** I am aware of the USGA Rules of Amateur status and I have conformed to these rules in every respect.

**Signature of Applicant:** \_\_\_\_\_

**MAIL TO:** PPGA  
 PO Box 882  
 Oaks, PA 19456

**We wish to compete in:**  
 \_\_\_ Amateur Division  
 \_\_\_ Senior 50-59  
 \_\_\_ Super Senior 60+

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