Where Should Handicap Strokes Fall?

By Jack Fulton, Jr.

TEN years ago, handicap strokes were allocated solely on the basis of distance. The longest hole on a given course was assigned stroke number one, the longest hole on the other nine received stroke number two, then back to the original nine to award stroke number three to the second longest hole on that nine, and so on, alternating the nines so that all odd handicap strokes came on one nine and all even strokes on the other.

In recent years, however, alert clubs have changed this system, realizing that distance alone as a basis for stroke allocation is unfair to the high handicap player. Difficulty, not distance, should be the governing factor.

In this connection, the USGA in 1933 made the following recommendation: "In allocating handicap strokes in their proper order to the eighteen holes of a golf course, the first stroke should be taken on the hole where it is most likely to be of use to the one receiving it. Generally speaking, this would be the most difficult par-4 hole of the course. The theory of this system is that on a long par-5 hole the high handicap player is more likely than in the play of a par 4 hole to lose the hole by 2 or more strokes, in which case the handicap stroke is of no use. On the short holes he is more apt than in the case of a par-4 hole to win or tie without his handicap, and so again loses the benefit of his stroke.

"It is desirable to allocate the first stroke to the first nine, the second stroke to the second nine, and continue alternating in this manner until the order of taking strokes is established for the full 18 holes."

The only problem remaining is how to determine the difficulty of the individual holes. A par-4 measuring 433 yards may be easier to play than one of 389 yards. Severeness of hazards, width of fairway, the prevailing wind and many other factors affect a hole's difficulty.

Here's how to determine difficulty: Collect several hundred actual scores made by your players. From this bunch of cards the total strokes taken by all the players on
each hole is determined. The theory is that the harder the hole, the more strokes will have been required by your players.

Having determined the order in which you will award handicap strokes, the next step is to establish handicaps for your players. Follow the Calkins system of handicapping. Have all players turn in their five best scores. These are averaged and from this average the par of the course is subtracted. Players are allowed, as their handicap, 80% of this difference. Fractional strokes of .5 and over are raised to the next full stroke.

Whenever a player completes a round in fewer strokes than the worst of his previous five best scores he is expected to turn it in so that a new average and a new handicap can be computed. Handicapping is a waste of time unless players cooperate to the extent of keeping their scores recorded and their handicaps where they should be.

Club Uses Trees as Distance Markers

By Harry E. Isaacs
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An experience which is probably a common one on many other golf courses is that distance markers are often inaccurately placed, require replacement frequently and add to maintenance cost because they are removed for storage in the fall and are often repainted before being set out in the spring. The demands on the green force are so great at this time of year, that a series of complaints often reach the green-chairman before they can be set in place.

In surveying each hole on our course we found that markers are not only frequently inaccurate in their position, but yardage on score cards is similarly incorrect. This has become apparent when markers have been placed to indicate not only distance from center of the tee but also to indicate distance to the center of the green.

These latter distances are of greater importance since the yardage of the drive becomes secondary to the distance from the drive to the green. It may be argued that the good golfer estimates these distances as part of that experience which earns his low handicap; yet the others who cannot estimate so correctly are in the majority.