

Glen Eagle Junior Golf Camp 2011

Application Form



NEW Returning Boy Girl

Applicant's Name

Date of Birth

OHIP #

Parent/Guardian Name

Mailing Address

Home Phone

Business Phone

Email Address

Medical History – *please indicate any medical conditions we should be aware of*

In Case of Emergency Call

Phone

Week Selected for Camp (\$325.00 + HST=\$367.25)

Extended Hours:

****Holiday Week for Camp (\$260.00 + HST =\$293.80)**

- | | | |
|--|--|--|
| <input type="checkbox"/> July 4 - July 8 | <input type="checkbox"/> Aug 2 – Aug 5** | <input type="checkbox"/> AM (\$20+hst) |
| <input type="checkbox"/> July 11 – July 15 | <input type="checkbox"/> Aug 8– Aug 12 | <input type="checkbox"/> PM (\$30+hst) |
| <input type="checkbox"/> July 18 – July 22 | <input type="checkbox"/> Aug 15 – Aug 19 | <input type="checkbox"/> AM & PM |
| <input type="checkbox"/> July 25 – July 29 | <input type="checkbox"/> Aug 22 – Aug 26 | ((\$45+hst) |
| | <input type="checkbox"/> Aug 29 – Sept 2 | |

Do you need clubs? Yes No **If yes:** Right Left Unsure

Level of Golf: Beginner Intermediate (2-3 years) Advanced (4 years +)

Terms of Enrolment

1. Fees must be paid in full before the camps begin and are non-refundable if cancelled less than 2 weeks prior to the date camp begins. If cancelled more than two weeks before commencement of camp there will be a \$50.00 administration fee. This form must be signed in order to complete registration.
2. All participants and parents agree that any picture taken at the golf course may be used in any promotion, without any further consideration to the participant or family.
3. I/We hereby release and indemnify Glen Eagle Golf Club and its officers, directors, employees and agents of any and all claims, damages of any nature whatsoever arising as a result of any accident, injury or loss however sustained, by the participant.

I/ We have read and understand the terms of enrollment and give full authority to Glen Eagle Golf Club to act on my behalf in the event of an emergency.

Signature of Parent/ Guardian _____ Date: _____

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