

2018



Application Form

Camper's Name: _____ Date: _____

Address: _____ Phone: _____

City: _____ Province: _____ Postal Code: _____

Email Address: _____

Age (6-15): _____ Gender: Male Female

In case of an emergency, Call _____ Phone: _____

(Please provide the name & phone number of the responsible person available during class time)

Mother/Guardian: _____ Daytime Phone: _____

Cell Phone: _____ Evening Phone: _____

Father/Guardian: _____ Daytime Phone: _____

Cell Phone: _____ Evening Phone: _____

Name(s) of person(s) to whom the child may be released to _____

FULL PAYMENT is due at time of registration (Per Student, Per Golf Camp). Please make checks or money orders payable to "Terry O'Brien".

2017 Junior Golf Camp PHOTO RELEASE

YES - Consent is hereby given for the applicant's picture to be taken and used for (including but not limited to) publications, news, and social media.

Please Select Camp Dates:

July 2 - 6

July 16 - 20

July 30 - August 3

August 20 - 24

Signature of Parent/Guardian: _____ Date: _____