

Chipping for Juniors Registration Form
Fees due with registration

Junior Information

Age of Participant: _____ Golf Left/Right _____

Last Name _____ First Name _____

Legal Guardian Information

Last Name _____ First Name _____

House # _____ Street _____

City _____ Postal Code _____

Phone # _____

Email Address: _____

If possible, the junior would like to play with the following participants this summer.

Please drop off this form to 1806 Shelter Valley Rd. Grafton ON or email to shelterminalpines@gmail.com.

Chipping 4 Juniors Golf Program

Terms of Agreement

All juniors will adhere to the rules set forth by the staff of the Shelter Valley Pines Golf Club.

Tee off times will begin at 9:00 AM. All tee off times will be posted before the lesson so rides can be arranged.

All juniors will use red tees during play unless notified otherwise.

Players will be placed into groups of three or four depending on the number of participants.

Adults who would like to volunteer are asked to notify the staff as soon as possible. Volunteers would be asked to play golf with the juniors and help monitor the on course play of the juniors. Volunteers would not pay for their round of golf.

Please fill in any dates the junior may miss this summer due to planned vacations.

The Shelter Valley Pines G.C. and its staff will not be responsible for any injury and/or death caused as a result of participation in this program.

Any failure to follow the rules and policies set forth by the club and their staff will result in the direct removal from the program. All fees are non refundable.

For the Junior

I will adhere to the rules and regulations with in this program.

Date

Printed Name

Signature

For the Guardian:

As the responsible party for _____, I will take full responsibility for the actions of the individual stated above.

Date

Printed Name

Signature