

2018 Junior Golf Academy Sign Up & Medical Release Form

Every Thursday Starting June 14 – July 26

5:30pm – 6:30pm

Ages 13 & Under

\$100 per junior (\$80 per additional junior)

Student's Name _____ **Age** _____

Parent's Names _____

Email _____

Home Phone _____

Emergency Phone _____

Additional Junior _____ **Age** _____

TO BE SIGNED BY PARENT OR GUARDIAN

I hereby release Meadia Heights Golf Club and the Junior Golf Staff from any and all liability from accident(s) that might occur while my child is participating in the Meadia Heights Junior Golf Camp. If my child is ill or injured and needs emergency care and I cannot be reached, contact a doctor or take him/her to the nearest hospital for emergency treatment. My signature indicates my permission to take the necessary action and administer treatment, and I agree to assume all responsibility and expenses incurred at such time.

Signature of Parent or Guardian _____

Date _____

Checks made out to Scott Sklar
Please complete and return the application to the golf shop
Meadia Heights Golf Club
402 Golf Road
Lancaster, PA 17602
717.393.9761