

# 2018 Junior Golf Camp Sign Up & Medical Release Form

**Tuesday June 26 – June 28**  
**Ages 6-10 (9:00am-10:30am)**  
**Ages 11-15 (11:30am-1:00pm)**  
**\$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 \_\_\_\_\_

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