

Waldau's Junior Golf Clinic
Hosted by Waldau Junior Golf, Inc. and KOA Lake Okeechobee Golf Resort
July 19, 2010 - July 23, 2010 at KOA Golf Resort

Golf Clinic Fee: \$100.00 For ages 8 - 13 only.

WALDAU'S JUNIOR GOLF CLINIC APPLICATION

Junior Golfer Name: _____ Age: _____ Female Male
Street Address: _____ City: _____ State: ___ Zip _____
Parents/Guardian Name: _____
Home Phone: _____ Work Phone: _____
Cell Phone: _____ Cell Phone: _____

Who is authorized to pick up child from Clinic? (please list full name(s) and relationship to child):

Phone: _____

Will you have your own clubs? Yes ___ No ___ If not - Right handed ___ Left handed ___

Junior Golfer Shirt Size: _____ Child? ___ or Adult? ___

Snacks will be provided on a daily basis, and a lunch will be served on the final day of the clinic. Please list any food that your child is allergic to or not allowed to eat, so that we may plan accordingly.

How did you hear about Waldau's Junior Golf Camp? _____

Waiver and Release

Acknowledging that participation in golf carries with it a small risk of physical injury, I agree that Waldau's Junior Golf, Inc. and its agents; KOA, Inc. and KOA Lake Okeechobee Resort and all, its agents and employees, and golf instructors shall not be liable to me or my child for any injury or damage, howsoever caused, resulting directly or indirectly from my child's participation in the Waldau Junior Golf, Inc. Junior Golf Clinic, hosted by KOA, Inc. and KOA Lake Okeechobee Resort, at any time preceding, during or after camp is in session and I hereby discharge the above listed from all actions, claims and demands I or my child may have for any such injury or damage.

CHECK I hereby grant permission to Waldau Junior Golf, Inc. and KOA Lake Okeechobee Resort for my child to participate in the Waldau's Junior Golf Clinic on the dates of July 19 - July 23, 2010.

Parent or Guardian Signature: _____ Date: _____

Clinic Representative Signature: _____ Date: _____

Fee: \$100.00 Received on _____ Method of Payment: _____

SPACE IS LIMITED TO FIRST 20 **PAID** JUNIOR GOLF CLINIC APPLICANTS

If mailing application please send to:
Waldau Junior Golf, Inc., PO Box 1976, Okeechobee, FL 34973 or
Drop off in person at Bridgette Studio of Graphic Design - 111 NE 2nd Street - Okeechobee
Please make checks payable to Waldau's Junior Golf, Inc.
For more information contact Bridgette 863-467-7300 Fax 467-8488