

2009 PEE WEE SUMMER CAMP

Youth Name: _____ Gender: Female ___ Male ___

Address: _____ City: _____ State: ___ Zip: _____

Birth Date (_____/_____/_____) _____

Email: _____

Phone: (cell) _____ (home) _____

Camp # _____ Date: _____ Alt choice Camp # _____ Date: _____

Camp # _____ Date: _____ Alt choice Camp # _____ Date: _____

Do you have golf clubs? Yes ___ No ___ (IF NO are you right handed ___ or left handed ___)

Is there a friend coming to camp that you would like your youth placed in the same group with?

Name of friend _____

With a 7 day notice we will do our best to place in the same group.

Any allergies, medical problems, and/or medications that we should be aware of: _____

Payment Method

Check enclosed ___ make check payable to Jetter Golf

Fax to 925.461.1013 or mail to 2843 Hopyard Road, Ste 143, Pleasanton CA 94588

Credit Card # _____ Expiration Date: _____

Visa or MasterCard accepted

Name as shown on card: _____

Emergency Contact Information

Emergency Contact: _____ Relationship: _____

(if parent/guardian cannot be reached)

Phone for Emergency Contact: _____

In case of injury to my child, I authorize Jetter Golf LLC, dba Pleasanton Golf Center and/or The First Tee Tri-Valley staff to administer minor first aid. In the event that I cannot be reached in an emergency, I agree to accept any and all determinations of need for medical assistance and/or administration of medical attention deemed necessary by Jetter Golf and/or The First Tee of the Tri-Valley representatives. I hereby give permission to the medical personnel selected by Jetter Golf and/or The First Tee representatives to secure any and all medical, hospitalization, dental, and/or surgical treatment. In the event that such medical attention is needed from a healthcare provider, all costs shall be the responsibility of the parent or guardian.

Equipment

I understand that any golf equipment received for use is the property of Jetter Golf and/or The First Tee of the Tri-Valley program, and may be returned at the discretion of The First Tee facility upon the termination of the participant's involvement in the program.

Media Release

I consent to the communication of information regarding my child's participation with Jetter Golf and/or The First Tee Tri-Valley via the internet. I hereby give Jetter Golf and/or The First Tee Tri-Valley and participating agencies permission to use film, videotape, and/or photography of the above mentioned minor for lawful promotional purposes.

The undersigned, in consideration of participation in the Jetter Golf and/or The First Tee of the Tri-Valley program, agrees to indemnify and hold Jetter Golf and/or The First Tee of the Tri-Valley harmless and release Jetter Golf and/or The First Tee of the Tri-Valley, it's Instructors, Employees, Agents, Facilities and Programs from any and all liability for any injury to person or property arising out of, or in any way connected with participation in this program or any future programs, including any injury caused by the simple negligence of Jetter Golf and/or The First Tee of the Tri-Valley, it's Instructors, Employees, Agents and Facilities.

A 72 HOUR NOTICE IS REQUIRED FOR CANCELLATIONS. CANCELLATIONS ARE SUBJECT TO A \$25.00 FEE.

PRINT PARENT/GUARDIAN FULL NAME: _____

SIGNATURE: _____ DATE: _____ Parent: ___ Guardian: ___