

JUNIOR GOLF CAMP

JUNIOR CAMP 2024 PRICING

**Returning Camper or Sibling Rate or Multi-week:
\$575 per child**

New Camper: \$625 per child

Please fill out registration form and mail it in

ONE ORDER FORM PER CHILD

Mail order form and payment to:

Indian Island Golf Course

Attn: Golf Camp

661 Riverside Dr.

Riverhead, NY 11901

Any questions please email:

indianislandjrgolf@gmail.com

INDIAN ISLAND JUNIOR GOLF CAMP



Ages 7-15

Monday- Thursday

10 am - 2 pm

- *Daily Contests with Prizes
- *Club Rentals Included
- *FREE Hat and Shirt
- *Lunch and Refreshments are provided daily

Friday

3:30 - 7:30 pm

- *5 Hole Scramble Tournament
- ***Parents come at 5:30 pm

Contact for questions:

631-727-7776

indianislandjrgolf@gmail.com

SUMMER 2024

~~WEEK 1: 6/24/24 - 6/28/24~~
Thank you !!

~~WEEK 2: 7/1/24 - 7/5/24~~
Thank you !!

~~WEEK 3: 7/8/24 - 7/12/24~~
Thank you !!

~~WEEK 4: 7/15/24 - 7/19/24~~
Thank you !!

~~WEEK 5: 7/22/24 - 7/26/24~~

~~WEEK 6: 7/29/24 - 8/2/24~~
Wait list only

~~WEEK 7: 8/5/24 - 8/9/24~~
Wait list only

~~WEEK 8: 8/12/24 - 8/16/24~~
Wait list only

~~WEEK 9: 8/19/24 - 8/23/24~~
Wait list only

~~WEEK 10: 8/26/24 - 8/30/24~~

PLEASE **CIRCLE** THE WEEKS THAT YOU WOULD LIKE TO REGISTER FOR

PRICE CALCULATION

_____ X \$575 = \$ _____
(# of weeks) (returner/sibling/multi-week price)

_____ X \$625 = \$ _____
(# of weeks) (first time price)

If you are registering multiple children you can **write one** check or CC #. Please just mail in the **same envelope**.

Child Name: _____

DOB: _____ Age: _____

Phone: _____

Do you have Clubs?: **YES OR NO**

circle one

Allergies: _____

Form of Payment: _____

Check or Card

circle one

Check # _____

Payable to: _____

Third Rock Management

Card #: _____

Expiration: ____/____ CVC: _____

Zip Code: _____

Credit Card Processings are subject to a **4% fee**

