

Golf Assessment Form

Player Information:

- **Name:** _____
- **Date:** _____
- **Age:** _____ **Birthday(*):** _____
- **Handicap:** _____
- **Years Playing:** _____
- **Coach (*):** _____

*Not required/applicable

Equipment Check:

Brand/clubs used: _____ **Fitted:** Y/N

1. Driving:

- **How do you rate your confidence with your driver on a scale from 1 to 10?**

- **What is your average driving distance?** _____ yards
- **How often do your drives land in the fairway?**
 - Always
 - Often
 - Sometimes
 - Rarely
- **Describe any common issues you face with your driving (e.g., slicing, hooking, topping, heel shots):**

2. Iron Play:

- **How comfortable do you feel hitting long irons (3-iron to 5-iron)? (1-10):**

- **How comfortable do you feel hitting mid-irons (6-iron to 8-iron)? (1-10):**

- **How comfortable do you feel hitting short irons (9-iron and wedges)? (1-10):** _____
- **Describe how well you control direction and distance with your irons:**

3. Short Game:

- **Rate your confidence in chipping near the green on a scale from 1 to 10:**

- **Rate your pitching ability from 50 yards out on a scale from 1 to 10:**

- **How effectively can you get out of sand bunkers? (Circle one)**
 - Very effectively
 - Effectively
 - Not very effectively
 - Not at all effectively
- **What are your typical outcomes with these shots?**

4. Putting:

- **How many putts do you average per round?** _____
- **Rate your confidence in making short putts (within 6 feet) on a scale from 1 to 10:** _____
- **Rate your ability to judge distances on long putts on a scale from 1 to 10:**

- **Do you have any persistent issues with putting (e.g., misreading greens, issues with pace)?**
-

5. Mental Game and Strategy:

- **How do you assess your decision making on the course?**
 - Excellent
 - Good
 - Average
 - Poor
 - **Describe how you handle pressure during competitive play:**
-

- **How well do you maintain focus throughout a round?**
-

6. Fitness and Conditioning:

Rate your overall fitness level as it pertains to golf? (Circle one)

- Excellent
- Good
- Fair
- Poor

7. Overall Self-Assessment:

- **What do you consider the strongest part of your golf game?**
-
-

- **What part of your game needs the most improvement?**
-
-

- **What are your golfing goals for the next six months?**
-
-

Additional Comments:

- **Please provide any additional comments or observations that might help in assessing your golf game:**

Legal Description and Terms

Disclaimer: The information provided in this Golf Assessment Form is for the purpose of assessing the player's golf skills and performance. It does not guarantee any specific outcomes or improvements. The assessments and recommendations provided are based on the assessor's professional judgment and the information provided by the player.

Confidentiality: All personal information and assessment details are confidential and will only be shared with the player's explicit consent. This information is used solely for the purpose of improving the player's golf performance and is not shared with third parties without prior approval.

Liability: By participating in this assessment, the player acknowledges that golf is a physical sport that carries inherent risks. The player agrees to hold harmless the assessor and any associated entities from any claims or liabilities arising from participation in the assessment or following the recommendations provided.

Indemnification: I agree to indemnify and hold harmless the Instructor from any and all claims, actions, suits, costs, expenses, damages, and liabilities, including attorney fees, arising out of or related to my participation in the golf lessons.

Photo and Video Release: I grant the Instructor the irrevocable and unrestricted right to use and publish photographs or videos taken during the golf lessons for promotional, educational, or any other purposes without compensation to me

Agreement: By signing this form, the player agrees to the terms and conditions outlined above and confirms that all information provided is accurate to the best of their knowledge. I have read this release form and fully understand its contents. I am aware that by signing this release, I am waiving certain legal rights, including the right to sue. I sign this release voluntarily and without any inducement or assurance of any nature.

Participant's Name (PRINT): _____

Participant's Signature (SIGN): _____ *Date:* _____

If the participant is a minor, the form should also be signed by a parent or legal guardian.

Parent/Guardian Name (PRINT): _____

Parent/Guardian Name (SIGN): _____ *Date:* _____