

# SUMMER CAMP 2024 Registration Form

## **Camper Information**

### Please Complete Form

Camper's Name (First/Last)				
Camper's Age Gender (Identifies As): M F				
Allergies? Y N				
Inhaler? Y N Epipen? Y N				
Golf Experience (Beginner /Intermediate/Advanced)				
Does your child have their own clubs? Y N				
If you need clubs, please indicate left or right handed? LR Unsure				
Parent/Guardian Name (First/Last)				
Parent/Guardian Contact Number				
Parent/Guardian Address				
Parent/Guardian Email Address				
Additional Authorized Persons				
AAP Contact Number				
Do we have your permission to take pictures/video for training and/or marketing purposes? Y N				
Do we have your permission to email you about future events? Y N				
How did you hear about summer camp?				



## **SUMMER CAMP 2024** Registration Form

Camp Selection(s) Please Complete Form				
Eagles - Ages 11-15 Camp 1		_	\$275 + HST = \$310.75 \$475 + HST = \$536.75	
Tues July 2 - Fri July 5	Morning(Limited Availability)	Full Day		
Camp 2	,			
Mon July 8 - Thurs July 11	Morning(Limited Availability)	Full Day		
Camp 3				
Mon July 15 - Thurs July 18	Morning (Limited Availability)	Full Day		
Birdies - Ages 6-10		-	\$275 + HST = \$310.75	
Camp 4		Full Day	\$475 + HST = \$536.75	
Mon July 22 - Thurs July 25	Morning	Full Day		
Camp 5				
Mon July 29 - Thurs Aug 1	Morning (Full Day Only)	Full Day		
Camp 6				
Tues Aug 6 - Fri Aug 9	Morning Only			
Camp 7				
Mon Aug 12 - Thurs Aug 15	Morning Only			
Summary				
	Sign	ature:		
Total:	Nam	ne:		

Please send completed form and payment by e-transfer to: summercamp@golfready.ca



Printed Name:

# SUMMER CAMP 2024 Waiver Form

## Please Complete Form

I, the undersigned parent/legal guardian of the child named below, hereby grant permission for my child to participate in Summer Camp hosted by Golf Ready and held at Pinewoods Golf at Sauble Beach. In consideration for my child's participation in the camp, I acknowledge and agree to the following terms and conditions:

Camper Information:
Child's Full Name:
Age:
Date of Birth:
Assumption of Risks: I understand that participating in golf activities involves certain inherent risks, including but not limited to, the risk of injury from golf equipment, uneven terrain, weather conditions, and other participants. I acknowledge that Golf Ready and Pinewoods Golf at Sauble Beach will take all reasonable precautions to ensure the safety of the participants, but I recognize that accidents and injuries may still occur.
Medical Treatment Authorization: In case of illness, injury, or medical emergency, I authorize the camp staff to obtain necessary medical treatment for my child. I understand that the camp staff will make every effort to contact me before obtaining medical treatment. However, if I cannot be reached, I authorize the staff to make decisions regarding medical treatment on my behalf.
Release and Indemnity: I hereby release and discharge Golf Ready, Pinewoods Golf at Sauble Beach, their officers, employees, agents, and representatives from any and all claims, liabilities, losses, damages, costs, or expenses arising out of my child's participation in Summer Camp.
I also agree to indemnify and hold harmless Golf Ready and Pinewoods Golf at Sauble Beach against any and all claims, suits, or actions brought against them arising out of my child's participation in the camp.
Behavioral Expectations: I understand that my child is expected to follow all camp rules and instructions provided by the camp staff. Failure to comply may result in dismissal from the camp without a refund.
I have read, understand, and agree to the terms and conditions outlined in this waiver.  Parent/Legal Guardian's Signature:
Date: