## Personal Contact Information

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  |  |  |
|  | Last | First | M.I. |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Primary Phone: |  | Cell Phone: |  |

|  |  |  |
| --- | --- | --- |
| Email |  | |
| Do you have any medical or physical conditions that we should be aware of?  Would you prefer ham, turkey, or vegetarian for lunch? | | |
| Do you own clubs? If not, how tall are you and are you right handed or left handed? | |
| Have you taken golf lessons before? If so, how often? | |
| How many times have you played on the golf course? If you have played, what is your handicap or average score? | |
| What other sports have you played? | |
| What is your goal for the workshop? | |

## Emergency Contact Information

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  |  |  |
|  | Last | First | M.I. |

|  |  |  |  |
| --- | --- | --- | --- |
| Primary Phone: |  | Alternate Phone: |  |