MINTHIS HILLS touch the sky

GOLF JUNIOR ACADEMY REGISTRATION FORM

Participant Name:			Gender:			
·				female	male	
Date of birth:			Are you:			Ļ
Health information:			Allergies:	left-handed	right-hande)d
ricalti i iioirriation.			/ mergres.	yes	no	
Other information:			Disability:			
Have you played golf b	ooforo?		Please specify:	yes	no	
riave you played golf t	yes	no	r lease speelly.			
	•					
Parent(s)/Legal Guard	ian(s)Details:					
Name:			Mobile :			
Address:			Home :			
			Work:			
			E-mail:			
			L-IIIaii.			
Emergency Contact:	If a compact for conditions on a condition		Phone:			
	If parrent/guardian cannot be	reached				
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 Minthis Hills Golf Club representatives. I hereby give permission to the medical personnel selected by Minthis Hills Golf Club 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.						
Derental/Legal Cuardian	loitialo.					
Parental/Legal Guardian	ililidis.					
I, the parent/legal guardian of the above named youth, give approval for participation in Minthis Hills Golf Club sponsored activities. I assume all risks of injury whatsoever and agree to hold harmless Minthis Hills Golf Club from claim(s) of any nature arising from activity connected with Minthis Hills Golf Club facility or program. This hold harmless agreement includes, but is not limited to, any claim due to injury proximately resulting from negligence of Minthis Hills Golf Club, its employees, PGA professional and his assistants, as well as participating agencies and volunteers.						
Parental/Legal Guardian	Initials:					
All pictures of my child	can be used for Minthis Hills adv	vertising/marke	ating campaign			
All pictures of my chile	can be used for withtins tims adv	Citisiiig/iiiaike	ting campaign.	I agree	I don't agre	e
PGA Professional:	David McKibben					
Mobile:	+357 99 063 972					
E-mail:	d.mckibben@minthishills.com					