

Downtown Optimist Club Junior Golf Program



Registration Form **Dates: June 16th, 18th and 23rd**

Participants Name: _____

Parent/Guardians Name: _____

Primary Phone Number: _____

Secondary Phone Number: _____

Parent/Guardians Email: _____

Known Allergies: _____

Participants Age: _____

Participants Skill level: Beginner (Never played golf)

Intermediate (Plays golf occasionally)

Advanced (Plays golf a lot)

DOWNTOWN OPTIMIST CLUB RELEASE FROM LIABILITY

I hereby agree to hold the *Downtown Optimist Club and its members* harmless from any liability that may arise from incidents, accidents, or COVID-19 related sicknesses involving my child while in the care of the Downtown Optimist Club or during the course of the 2020 Junior Golf Program. I am fully aware and fully understand the risks that are present during this time, and I take full responsibility of any incident, accident, or a COVID-19 related sickness involving my child.

Name of Participant: _____

Name of Parent/Guardian (Please Print): _____

Date: _____

Signature of Parent/Guardian: _____

Witness Signature: _____