

2017 Summer Junior Camps

Discovery Camp (ages 5-8): \$79 per person

This camp is designed for the junior to experience golf in a relaxed environment. They will learn the basics in swing, chipping, putting, general etiquette and safety. The goal is to have fun and experience the game in a fun way through games, swing practice and putting.

June 27-29: 10:30am-11:30am

July 18-20: 10:30am-11:30am

August 1-3: 10:30am-11:30am

August 22-24: 10:30am-11:30am

<u>Tuesday, Wednesday, Thursday</u> ~ Instructor Cory Larro

4 Day Junior Camp (ages 9 & up): \$99 per person

This camp is intended to give your junior basic essentials in playing the game of golf in a fun and stress free environment. Each day will have prizes, fun games while learning full swing, chipping, putting, and bunker shots. We will explore some basic etiquette and rules of golf. Last day meets at King City Golf Course to play a few holes. *Thursday's class*, *drop off and pick up your kids at King City Golf Course*.

 July 10-13:
 10:30am-11:30am
 Thursday golf meets from 1:00pm-3:00pm

 July 24-27:
 10:30am-11:30am.
 Thursday golf meets from 1:00pm-3:00pm

 August 7-10:
 10:30am-11:30am.
 Thursday golf meets from 1:00pm-3:00pm

Monday, Tuesday, Wednesday, Thursday ~ Instructor Cory Larro

* up to 12 kids per camp *

Please circle the DATES of the class above that you are signing up for

Students Name:		Age:
Parents Name:		
Phone:	Email:	
Medical Car I, the undersigned certify that I am 18 years of age for the staff of Tualatin Island Greens to seek duri listed above and for the medical attention to be gi costs of medical treatment. I, the undersigned, for discharge, Tualatin Island Greens and its staff, off any and all liability, claims, demands, actions, and damage that may be sustained or occur during par	iven on the event of accident, injury, or il or ourselves, our heirs, executor, and ac ficers, agents, employees, representative ad causes of actions whatsoever arising of	. I give permission I attention for myself and/or the participant liness. I will be responsible for any and all dministrators, waive, release, and forever s successors, sponsors, and assigns from out of or related to any personal property
Signature (Parent or Guardian if Jr):	Print Name:	
Physician:	Insurance Co:	
Phone:	Policy #:	
STAFF USE ONLY Below		

* <u>Ring up under JR Group</u> * \$ Amount______Method of payment______Date:_____

Please Staple Receipt to the back of this form and File in JR Camps Binder, behind Camp Dates