



ELY GOLF CLUB YOUTH GOLF CAMP

BEGINNERS (June 15-17) Register before June 9th
INTERMEDIATE LEVELS (June 22-24) Register before June 15th
ADVANCED (June 14-16) Register before June 9th – Priority to previous participants
Girls & Boys Ages 8 – 14 or grades 3rd – 8th
\$15 – Check Preferred – On list after payment

Our Youth Golf Program will focus on introducing and teaching new participants the game of golf and reinforcing proper golf skills for those who have played before. In a fun and encouraging manner Ely Golf Club volunteers will teach and reinforce etiquette, golf rules and skills through repetitive drills, games and actual play on the course. No Lunch or Tournament this year. Students must carry a mask and wear one indoors. Masks outside optional with social distancing. Coaches are vaccinated.

On first day, please arrive between 8:30 and 8:45 a.m. to assist us in fitting clubs to those who need them. Players will be placed in groups based on age, skill and experience. Clearly mark shafts when bringing own clubs-address labels work well. Lessons will continue outside all week. Players must be prepared with appropriate clothing, tennis or golf shoes (no flip flops), jackets, and sun or bug repellent – See lotion permission below. Questions about weather – call the clubhouse. The fee of \$15 is for each child – no family rate. Inquire about free scholarships upon registration or call/text Lori Casey (574-850-5789). Students are placed on list after payment is received. **Classes are limited.** Parent/Guardian will be notified if placed on a waiting list.



Participants Full Name		Gender	Age	Date of Birth: / /20
Approximate Years of Golf Experience? (skill level)		Height	Will You Need Clubs? Yes <input type="checkbox"/> No <input type="checkbox"/> Golf Right Handed <input type="checkbox"/> Golf Left Handed <input type="checkbox"/>	
Prior <u>Ely</u> Golf Camp Experience? Yes <input type="checkbox"/> No <input type="checkbox"/>	Street Address			
Agree to give your child bug/sun lotion? (child will apply) Yes <input type="checkbox"/> No <input type="checkbox"/>	City		Zip Code	
Emergency Contact Person #1	Relationship to Youth?		Phone # or Cell #	
Contact Person #2 (If needed)	Relationship to Youth?		Phone # or Cell #	
Contact Person's Email (To provide golf information - not for advertisement)				

Signature below of child's guardian or parent indicates agreement, acknowledgement and responsibility of my child as they participate in this golf camp. I understand the exposure to inherent risk of participation. I also understand staff and volunteers may not carry personal insurance to cover my child's injuries due to participation. I accept full responsibility and cost of treatment for my child due to injury or damages while participating or traveling to and from this activity. Please see golf manager if questions about this waiver before agreeing to child's participation.

Date _____

Parent or Guardian Signature Waiver and Participation Agreement:

▶ **Please list confidential allergy, health issue, limitations, conflicts, etc., for safety and camp success. (on back)** ◀

Clubhouse staff please check: Cash Check