



SUMMER CAMP

Monday-Thursday, June 24-27 at Boundary Oak

Open to all girls aged 7-17

FEE: \$150 for Girls Golf members and \$175 for non-members (includes snacks, prizes and instructors' fees)

The Schedule

Monday, June 24 - Day 1

9:00 AM - 12:00 PM

Includes the Five Fundamentals, Swing Technique and Swing Game

Tuesday, June 25 - Day 2

9:00 AM - 12:00 PM

Includes Chipping & Pitching, Putting, and Putting Game

Wednesday, June 26 - Day 3

9:00 AM - 12:00 PM

Includes Full Swing Technique with Irons, Woods, and Full Swing Game

Thursday, June 27 - 12:00 PM - 3:00 PM

Play the Golf Course

Awards and Snacks

**Camp will be hosted by some or all of our Boundary Oak Instructors
Kevin Crouch, Katie Webber Krawesky, Stephanie Hayes, Kyle Calonico,
Matt Rivera, and Assistant Elizabeth Schultz**

****Golf Clubs will be provided if your daughter doesn't own clubs**

**GIRLS GOLF CAMP
REGISTRATION FORM**

Please complete this form and return with your check no later than **Monday, June 10, 2013** to:

**Walnut Creek Girls Golf
P.O. Box 31156
Walnut Creek, CA 94598**

We accept only personal checks or money orders. Please make the check out to "WCCFFYF-Girls Golf". Fee for camp is \$150 for members; \$175 for non-members; \$100 for each additional sister.

Daughter's name: _____

Birthdate: _____

Daughter's name: _____

Birthdate: _____

Does your child have golf clubs? _____ Yes _____ No
(If your answer is No, golf clubs will be provided.)

Parent's Name _____

Address _____

Cell Phone Number _____

Consent & Release - Parent or Guardian MUST sign in space indicated below for your child's camp participation.

Parent/Guardian Statement

I, the parent (or guardian) of the participant named above, am familiar with the plans and purposes of LPGA-USGA Girls Golf and give full permission for my child/ward to attend LPGA-USGA Girls Golf events and to participate in all phases of LPGA-USGA Girls Golf activities. I understand that, by signing this Consent & Release Form below, I agree to waive and release any rights and claims for damages against, and hold harmless LPGA-USGA Girls Golf, LPGA, The LPGA Foundation, the USGA, and each of their respective officers, directors, employees, volunteers, workers, members and agents, from and against any and all injuries or damages which may result from or arise out of my child's/ward's participation in LPGA-USGA Girls Golf events and activities.

Dispute Resolution

In the event of a controversy or claim arising out of or relating to this Participant Form the undersigned hereby agrees to arbitration held in a mutually agreeable location in accordance with the Commercial Arbitration rules of the American Arbitration

Association. A judgment rendered by the arbitrators shall be final and nonappealable, and may be entered in any court having jurisdiction thereof.

Medical Emergency Statement

I, the parent (or guardian) of the participant, give my permission for my child/ward to receive emergency medical treatment, if necessary, as a result of participation in the LPGA-USGA Girls Golf program. It is understood that every effort will be made to contact me before taking this action.

Release of Participant

Person(s) other than parent who may pick up the participant at the end of any LPGA-USGA Girls Golf event:

Name, Relationship, Day Phone

In Witness Whereof I have read, understand and agree to this entire consent form. *

Name

Date

*** PARENT/GUARDIAN SIGNATURE REQUIRED**

For further information, please contact Site Director Natalie Inouye at girlsgolfwc@gmail.com.