



Hillcrest Golf Course
Coffeyville Recreation Commission

JUNIOR GOLF

**AGES
8-18**



Tuesdays & Thursdays
JUNE 7th, 9th, 14th, 16th, 21st, 23rd, 28th, 30th
HILLCREST GOLF COURSE (1509 N. CLINE RD)

WHY PLAY GOLF:

GOLF IS A GREAT GAME
FOR YOUNGSTERS AS IT:

- HELPS BOOST THEIR HEALTH AND CONFIDENCE
- TEACHES THEM PERSONAL SKILLS
- KEEPS THEM ACTIVE WHILE HAVING FUN
- GETS THEM OUTSIDE INTO THE FRESH AIR
- PROVIDES AN OPPORTUNITY TO MEET OTHERS
- HELPS THEM TO DEVELOP NEW SKILLS
- IS A GAME FOR ALL ABILITIES

8:00am-9:30am Ages 8-10
9:30am-11:00am Ages 11-14
11:00am-12:30pm Ages 15-18

Signup at CRC (508 Park)
Registration Fee:

\$35 in district

\$40 out of district

Deadline: June 3rd

It is suggested to provide your own
Clubs but there will be a limited number
of Clubs available to borrow

MORE INFO: Call 620-251-5910 or visit www.coffeyvillerec.com

CRC PROGRAM REGISTRATION FORM

Return Completed Form and Fee to:
COFFEYVILLE RECREATION COMMISSION
508 Park
COFFEYVILLE, KS 67337

PLEASE PRINT

Name of Participant _____ Mailing Address _____

Street Address: _____ City _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Age: _____ Date of Birth: ____/____/____ Male/Female (Circle One) Grade: _____

School: _____

Emergency Name and Number (Other Than Parent/Guardian):

Name: _____ Phone: _____

How did you hear about this program? _____

<u>Name of Program/Activity</u>	<u>Session Date</u>	<u>Level</u>	<u>Fee</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
TOTAL FEES			\$ _____

TO WHOM IT MAY CONCERN:

In the event that the above-named individual is taken to an emergency room or medical care facility and in need of treatment, any member of the Coffeyville Recreation Commission, City of Coffeyville, Hillcrest Golf Course, staff, volunteers and/or instructors has my consent to authorize such treatment by the doctor(s) of their choosing as the doctor(s) deem necessary.

I, the undersigned, do hereby acknowledge that the above will participate in the listed activities with full knowledge of the risks involved and I hereby agree to assume those risks and hold the Coffeyville Recreation Commission, City of Coffeyville, Hillcrest Golf Course all its' officers, employees, coaches, officials, and volunteers free from liability for any injury, harm, or complications of any kind. Furthermore, I do understand that accident insurance is not provided by the Coffeyville Recreation Commission, City of Coffeyville, Hillcrest Golf Course, and I hereby agree full responsibility for all medical expenses resulting from any accidents or injuries suffered by the above-named child while participation in the activity/activities listed above. Any pictures taken during the program will be used for future marketing.

Signature: _____

Print Name: _____

Relationship to Participant _____

Date _____

Special Instructions: _____