

# 2009 NON MEMBER REGISTRATION FORM

(One registration form per family)

Junior Information Name	Sex	Date of Birth	Grade and School next year 09-10 School	Previously enrolled? Y or N If no, List golf experience
	M F			
	M F			
	M F			

## PARENT INFORMATION

Name

Phone

Address

City

State

Zip

E-mail address

## Schedule and Volunteer Dates

June 10	June 17	June 24
July 1	July 8	July 15

Don't forget to circle your volunteer dates on this form. Any form without **2** volunteer dates circled for **each** junior golfer will be returned.

**FEE PER CHILD: \$125.00** (Non-refundable after 1st session)

**PAYMENT AND REGISTRATION FORM DUE BY 4/10/09**

Make your checks payable to "HAZELTINE JUNIOR GOLF"

Mail to: Joe Vaudreuil  
9069 Hyland Creek Circle  
Bloomington, MN 55437

## **RELEASE AND INDEMNITY:**

I agree that Hazeltine National Golf Club, its members, directors, employees and volunteers, and/or the City of Chaska, its agents and employees, will not be held liable for any accident, injury, damage or loss of personal property, however caused, and agree to release them from all claims and damages which may arise as a result of such accidents or loss. It is further agreed that all risks while watching and/or volunteering in the Hazeltine Junior Golf Program are assumed by the junior golfer and his parent(s), guardian or escort.

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE