



RICHMOND
COUNTRY CLUB 1958

JUNIOR JUNIOR GOLF CLINIC REGISTRATION 2021

tel: (604) 277-3141 | fax: (604) 241-3706 | sturgeon@richmondcc.ca

Name of Participant: _____

Date of Birth (dd/mm/yyyy) _____ / _____ / _____ Age: _____

Name of School: _____

Name of Guardian: _____ Email: _____

Address: _____

Home Phone: _____ Cell Phone: _____

PAYMENT INFORMATION:

Total Amount: _____ (check one) Cash Debit Credit

Member Name: _____ Member #: _____

Credit Card: _____ Card Number: _____

Name on Card: _____ Expiry Date: _____

Please indicate the sessions that the Junior Golfer will be attending:

AGES 4 - 7: WHITE LEVEL (30 Min. Sessions) Starting at 3:00pm \$75.00 MEMBERS / \$100.00 NON-MEMBER (per month)	AGES 8 - 11: ORANGE LEVEL (40 Min. Sessions) Starting at 3:50pm \$85.00 MEMBERS / \$110 NON-MEMBERS (per month)
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APRIL SESSION:	April 6	April 13	April 20	April 27	
MAY SESSION:	May 4	May 11	May 18	May 25	
JUNE SESSION:	June 1	June 8	June 22	June 29	no session on 15
JULY SESSION:	July 6	July 13	July 20	July 27	
SEPT. SESSION:	Sept 7	Sept 14	Sept 21	Sept 28	

I release Richmond Country Club, and its executives, employees, volunteers, chaperones and others, without reservation or restriction, from any and all liabilities related to any damage, accident, or injury that could arise in the course of the Junior Junior clinics.

Signature: _____ Date: _____

OFFICE USE ONLY

Jonas

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