



www.andersonscreek.com

240 North Road, Stanley Bridge, PE

Registration Form

Payment is due at the time of registration.

Please contact the Pro Shop either in person or 902-886-2222.

Program Name: _____ Program Start Date: _____

New Participant Returning Participant

Child's Name: _____

Birthday: _____ Age: _____ M/F: ___ Height (inches): _____

Has Own Clubs: Y/N, if no, please specify if they are left or right handed: _____

Allergies/Medical Conditions: _____

Parent / Guardian

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone #1: _____ Phone #2: _____

Email: _____

Emergency Contact

Name: _____ Relationship: _____

Phone: _____

DISCLAIMER:

Having been informed of the program(s) affiliated with Andersons Creek Boys and Girls program to provide supervised golf lessons/instruction for boys and girls, I/We, the parents of the above-named child/children hereby give our approval to his/her participation in any and all activities during the current season. I/We assume all the risks and hazards incidental to the conduct of activities, transportation to and from the activities: and I/We do further hereby release, absolve, indemnify, and hold harmless Andersons Creek Golf Club, the organizers, sponsors, and the supervisors, any or all of them. In case of injury to my/our child/children, I/We hereby waive all claims against the organizers, sponsors, or any of the supervisors appointed by them. I/We likewise release from responsibility any person transporting my/our child/children to or from the activities.

SIGNATURE OF PARENT OR GUARDIAN: _____

DATE: _____

Payment Method:

M/C Visa Cheque AMEX Other- _____