

Parental/Guardian Participation Consent Form

I, _____ (parent/guardian), do hereby grant permission for _____ to participate in the Women In Golf Foundation (WIGF) Summer Camp. I understand that camp begins at 8:30 am and ends each day at 5:00 pm on full days and ends at 12:00 pm on the half days. I will not hold the Women In Golf Foundation responsible for my child before each day's session begins or after each session ends. Listed below are any critical or chronic conditions, such as asthma, allergies, etc. that may affect my child's activities in the golf camp. If any health problems exist, WIGF is authorized to seek medical attention. I certify that the above child is covered under a medical insurance policy.

Health conditions: _____

I, being Parent/Guardian of _____,

hereby consent that any photographs and/or motion pictures or videotape in which she/he appears and any audio recordings made of his/her voice may be used by the Women In Golf Foundation, its assigns or successors in whatever way they desire including television and electronic media; furthermore, I hereby consent that such photographs, films and recordings and the plates and or tapes from which they are made shall be their property, and they shall have their right to sell, duplicate, reproduce, and make other uses of such photographs films, recordings, plates, and tapes as they desire free and clear of any claim whatsoever on my part.

WAIVER AND ASSUMPTIONS OF LIABILITY FOR CHILD

- 1. I have enrolled my child in the WIGF camp.
- 2. I know that there are some dangers on golf courses, including driving ranges, and practice facilities and there is potential for being hit by errant golf balls, being hit by a swinging club, etc.
- 3. I understand that Women In Golf Foundation, Inc. staff encourages safety at all times at the facility.
- 4. On behalf of myself and my child, I agree to:

A. Waive any claims against The Women in Golf Foundation, Inc., Browns Mill Golf Course, for any injuries sustained by my child due to his or her presence at the golf facility.

B. Indemnify and hold harmless the Women in Golf Foundation, Inc., Browns Mill Golf Course and any partners from any claim brought against it due to the presence or actions of my child at the golf facility.

5. For the purpose of the Waiver and Assumption of Liability for child, Women In Golf Foundation, Inc. and includes all of its owners, concessionaires, directors, agents, partners and employees.

Signed by: _____
Parent/Guardian

Date: _____

**Women In Golf Foundation, Inc.
P O Box 16834
Atlanta, GA 30321**



Women In Golf Foundation Inc.
Growing the Game of Golf for Women and Youth

Presents

**2017
Youth Golf, Leadership and Life
Skills Summer Camp
and
New! College Golf Prep Camp
at**

Browns Mill Golf Course
480 Cleveland Avenue
Atlanta, GA 30354

Program supported by the
United States Golf Association (USGA),
Ladies Professional Golf Association (LPGA), and
the Professional Golf Association (PGA)

**GIRLS WANTED!!!!
LPGA/USGA GIRLS PROGRAM INCLUDED!!!!**

Introduction to the game of golf for girls and boys



- Golf skill fundamentals: grip, stance, putting, chipping, pitching, full swing, rules and etiquette.
- Learn to play a game that mirrors life and its obstacles.
- Learn the physical and mental game and its relationship to life.
- Intermediate and advanced skill development
- Establishment of handicaps and handicap reduction
- Life skill development to assist in leadership
- development and the preparation for college.
- Learn decision-making, planning and organization, how to focus and improve self-esteem.
- Program includes golf fundamentals 3 days a week and life skills classes 2 days a week. Camp ends with a 9 hole tournament after each session.

Inquire about the "College Golf Prep Camp"

Beginners and Intermediate

June 12th - 23rd

Ages 8 - 18

Monday - Friday 8:30 am - 5:00 pm

\$425 – Early Bird Registration Fee - by May 26th

\$450 - Registration Fee - by June 5th

\$475 - Onsite Registration Fee

New! College Golf Prep Camp

July 17th - 20th

Ages 13+ (with handicap of 20 or less)

Monday - Thursday

- Learn the dynamics of competitive college golf
- Course Management
- Shot Shaping
- Scoring
- Social Etiquette
- NCAA Compliance

\$350* — Day Golf Experience Camp

\$650* — Full Immersion On-Campus Golf Experience including housing (double occupancy)

***Early Bird Registration \$25 discount - by June 15th**

Registration deadline — June 30th

A Portion of the Registration Fee is Tax Deductible.

WIGF is a 501C- 3 Non-Profit Organization.

EIN #58-2527454

Make Check or Money order payable to:

Women In Golf Foundation, Inc.

Mail to: P. O. Box 16834; Atlanta, GA 30321

Credit Card: Visa MC AMX Discover

Card# _____

EXP: _____

Name on card: _____

Signature: _____

Date: _____

Register Early - participant slots limited

Complete registration and return with payment

For more information visit:

www.womeningolffoundation.org

Contact number: 770-335-2364

Fax: 404-241-5811

Application:

Please complete all information:

Name: _____

Address: _____

City: _____ ST: _____ ZIP: _____

Phone: _____

School: _____ Grade: _____

Age: _____ Date of Birth: _____

Sex: M/F Weight: _____ Height: _____

Parents/Guardian:

Name: _____

Daytime contact: _____

Email: _____

Emergency Phone: _____

(Please circle) Session I Session II

Why are you interested in Golf?

Have you ever taken golf before? Y/N

If so, when? _____ Where? _____

Do you have golf clubs? Y/N

I am committed to attend the golf classes and practice.

Participant Signature: _____

Date: _____

Guardian/signature: _____

Date: _____