



# PORT COLBORNE COUNTRY CLUB

## Junior Programs

*Port Colborne Country Club welcomes all levels of Junior golfers between the ages 6-16. Allow our PGA of Canada Professional Staff to help your golfer develop new skills and techniques through one of our programs. Get your children involved in a sport that will last a lifetime!*

Please Check Box for camp you request to join:

### Saturday Morning Clinics

**"Future Stars Program" \$99** plus tax

10:00 am to 11:00 am for fourteen (14) weeks

From May 19th thru August 25th, 2018

### Week Long Camp **\$299** plus tax

5 Days Monday to Friday 8:30 to 4:30 pm

July 23rd to July 27th

### Junior Applicant Information:

Name of Junior Applicant: \_\_\_\_\_

Birth Date (dd/mm/yy): \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

### Payment Information:

Name of credit card holder: \_\_\_\_\_

Payment method  Cheque  Credit Card  Cash  Member Account

Credit Card or Member#: \_\_\_\_\_

Expiry date: \_\_\_\_\_

Card Type:

Visa  Mastercard  American Express



Junior Programs

## Emergency Contact Information:

Health Card Number: \_\_\_\_\_

Allergies/Health Concerns: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

First Emergency Contact Name: \_\_\_\_\_

First Emergency Contact Phone Number: \_\_\_\_\_

*(In the Event of a emergency the second emergency contact will only be called if the first emergency contact is unavailable to reached, unless asked to do other wise)*

Second Emergency Contact Name: \_\_\_\_\_

Second Emergency Contact Phone Number: \_\_\_\_\_

## WAIVER AND CONSENT

**PCCC Privacy Policy:** Personal information collected for the Summer Camp will be used and held solely by PCCC. Information is collected for the operation of the camp which includes safety and emergency purposes, and for future correspondence with camp participants which may include information about relevant upcoming events.

**Conduct:** The programs are operated by, and located on the PCCC's premises. To this end, all registrants will respect the facilities and grounds, and will abide by Camp rules. Failure to do so may result in immediate expulsion from a program, without refund of payment.

**Refund Policy:** Refunds will be issued for any cancellations received 7 days prior to the first day of attendance. Inclement Weather: Camps will operate "rain or shine." PCCC instructors will provide alternative indoor activities (golf and non-golf related) in the event of inclement weather. Refunds or credits will not be issued for inclement weather, and no make-up dates.

Saturday morning clinics are valid for 10 (ten) weeks of instruction, any additional weeks can be added at a cost of \$20 per session. No refunds or exchanges for dates that are missed. Clinic will not take place on August 11th.

**Lunch:** PCCC will provide a lunch to camper's each day. No menu substitutions. PCCC will provide vegetarian and allergy conscious options when necessary.

**Waiver and Consent:** I, the undersigned, hereby authorize PCCC or anyone acting on its behalf, to acquire medical aid that may be required as a result of accident or injury sustained by my child. I hereby indemnify and save harmless PCCC from any and all actions, claims and demands for damages, loss or injury, however arising, which hereto after may have been sustained by my child while participating in the camps.

I have read and agree to the above

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date