



ESSEX COUNTY JUNIOR GOLF ASSOCIATION

P.O. Box 23018, Windsor, ON N8X 5B5
(519) 259-4309, INFORMATION@ESSEXJUNIORGOLF.ORG

2006 E.C.J.G.A. Membership Registration Form

Registration fee is \$60.00 for Individual or \$80.00 for family.

(Age Requirement – Ages 7-18 yrs. – as of Jan. 1, 2006)

MUST TAKE LESSONS TO BE A MEMBER

Child #1 Name _____ Birth Date _____ Male or Female
 Child #2 Name _____ Birth Date _____ Male or Female
 Child #3 Name _____ Birth Date _____ Male or Female
 Address _____ City _____ Postal Code _____
 Telephone No. _____ E-mail _____
 Father's Name _____ Mother's Name _____

Lessons:	Child #1	Child #2	Child #3		
Session #1 (\$160.00)	_____	+	_____	+	_____ = _____ <i>sub total</i> Starts Feb. 11
Session #2 (\$160.00)	_____	+	_____	+	_____ = _____ <i>sub total</i> Starts Apr. 17
Session #3 (\$120.00)	_____	+	_____	+	_____ = _____ <i>sub total</i> Starts June 12
Summer (\$120.00)	_____	+	_____	+	_____ = _____ <i>sub total</i> Starts July 3
Session #4 (\$160.00)	_____	+	_____	+	_____ = _____ <i>sub total</i> Starts Aug. 7
Full season (\$600.00)	_____	+	_____	+	_____ = _____ <i>sub total</i>

Registration: (please check one) Individual (\$60) or Family (\$80) _____ *sub total*

***Note: Summer session option in place of Session#3.*

===== (total)

I am willing to be contacted by email in place of the traditional mailing

Session #1 (8wks.), Session #2 (8wks.), Session #3 (6wks.), Summer (6wks.), Session #4 (8wks.)

Session (#1 at Dome), (#2, #3, #4 at EITHER Hambleton or Belleview), (SUMMER at Belleview ONLY)

Note: Proper dress attire is required.

Please make cheque payable to: **E.C.J.G.A.**
 (postdated cheques not accepted)
 (\$25.00 charge for all NSF checks)

Mail to: **E.C.J.G.A.**
P.O. Box 23018
Windsor, ON N8X 5B5

Parental Disclaimer

Due to legal issues, an instructor is no longer allowed to physically touch a student (i.e. positioning an arm or leg) without parental consent. Should your child require our instructor's assistance, we require your signature on the following disclaimer or we can only use oral or visual means to instruct the student.

I, (parent/guardian's name) _____ give permission for my child/children _____ to receive physical help if needed during golf instruction and further agree that all photos taken of my child/children by the E.C.J.G.A. or any of its representatives may be used in any or all brochures, announcements, or publicity releases.

Signature (parent/guardian): _____ Date: _____

I give my son(s)/daughter(s) permission to join the E.C.J.G.A. and hereby waive any and all rights and claims for damages arising out of any accident or injury occurring before/during/after the lesson or events put on by E.C.J.G.A. I release and discharge the E.C.J.G.A., its employees, directors, committee members and volunteers acting within the scope of their duties in such event from all liability in respect to such accident or injury.

Signature (parent/guardian): _____ Date: _____

FOR OFFICE USE ONLY

Paid by: Cash Cheque Bingo Credits Board Credits

APPROVED BY: _____