

Brimfield Township



2013 Registration Form

The 2013 Brimfield Township Junior Golf League provides boys and girls ages 9 – 15 the opportunity to play in a weekly organized golf league that consists of various formats of play. The Junior Golf League will have a tee time on Wednesday mornings at 9:00 AM for eight weeks: June 19 – August 14. Please inform us if you will not be able to participate on any certain date.

*****Golfers must check in every Wednesday inside the clubhouse*****

*****PLEASE PICK UP YOUR GOLFER AT 12:00 PM*****

There will be no league play on July 3

Parental Assistance

To ensure safety and reasonable pace of play, we are seeking parental assistance. If you are available to volunteer simply call Amy at 330-678-0739. Sunny Hill will provide a complimentary golf cart (NOT FOR THE GOLFERS) to all volunteers.

Fees

The golf league has a fee of \$74.00 per junior. The fee includes a lunch each week (hot dog, chips, drink) which will require a ticket that is given out each week during check-in. Please make checks payable to Brimfield Township.

Friends/Foursomes

Golfers will be playing in foursomes (one chaperone per foursome). We will try our best to place you with friends but will not make a guarantee. Please note your request on the registration form.

Waiver of Liability and Permission for Photo Release

I, (print name) _____, intending to be legally bound, do hereby for myself, my heirs and assignees, waive any and all claims to damages I may have against Brimfield Township or any agent or representative of the afore mentioned and give my permission for (junior name) _____ to participate in any above mentioned programs. Video and photographs are periodically taken of participants during programs and these photos may be used for Brimfield Township and/or local newspaper.

Signature of Parent/Guardian

Date

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Youth Information

Name: _____ Gender: Female ___ Male ___

Address: _____

City: _____ State: _____ Zip Code: _____

Birth Date: (___/ ___/ ___) School: _____

Parent/Legal Guardian: _____

Relationship: _____ (please specify parent or legal guardian)

E-mail Address: _____ (working e-mail address required)

Phone: Cell _____ Home _____

Participation Consent Form completed by: Mother ___ Father ___ Legal Guardian ___

Medications/Allergies: _____

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Additional Information (if above parent/guardian cannot be reached)

Emergency Contact Name: _____

Relationship: _____

Phone: Cell _____ Home _____

In the event that I cannot be reached in an emergency, I agree to accept any and all determinations of need for medical assistance and/or administration of medical attention deemed necessary by Brimfield Township representatives. I hereby give permission to the medical personnel selected by Brimfield Township representatives to secure any and all medical, hospitalization, dental, and/or surgical treatment. In the event that such medical attention is needed from a healthcare provider, all costs shall be the responsibility of the parent or guardian.

Parent/Guardian Initials: _____

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Equipment

Does the youth have a set of golf clubs? Y ___ N ___

If no, is youth RH ___ or LH ___

Playing Ability

Has the youth played regularly on a golf course? Y ___ N ___

What is their level of play? _____

*Please return completed form and fee to:
Brimfield Town Hall
1333 Tallmadge Road
Brimfield, Ohio 44240
Attn: Amy Arnold
330-678-0739
aarnold@brimfieldohio.gov*