



Braintree Junior 2019 Summer Golf Clinics



Pam Kiley, Instructor & Junior Golf Director
Questions contact Pam at: **GOLF101@BELD.NET**

Sign up in person at the Braintree Golf Course Pro Shop
Checks payable to Town of Braintree-Golf Course, MasterCard/Visa accepted
Space is limited - Payment is non-refundable

Clinic will teach students the fundamentals of Golf:

SWING- grip, stance, alignment, back swing, impact, follow through **SHORT GAME** - chipping, putting, sand shots

Rules, Course Etiquette and a One Hole Playing Lesson- tee to green instruction

WEATHER: All Programs are rain or shine. In the event of inclement weather we will have indoor lessons or we may offer Friday (at the director's discretion) as a possible make up-rain date.

Boys & Girls AGES 8 – 11 Session A: 9 AM ↴ Boys & Girls AGES 11 – 14 Session B: 10:30AM
\$99.00 per Session



REGISTRATION Junior 2019 Summer BOYS & GIRLS Golf Clinic

Please check which clinic your child will attend. You may sign up for more than one clinic (i.e. week 1 & 2, but you cannot sign up for back to back clinics: 1A & 1B)

<input type="checkbox"/>	Session 1A:	June 24, 25, 26, 27	Time: 9 am – 10:15am	\$99	Ages 8-11
<input type="checkbox"/>	Session 1B:	June 24, 25, 26, 27	Time: 10:30 am -11:45 am	\$99	Ages 11-14
<input type="checkbox"/>	Session 2A:	July 8, 9, 10, 11	Time: 9 am – 10:15 am	\$99	Ages 8-11
<input type="checkbox"/>	Session 2B:	July 8, 9, 10, 11	Time: 10:30 am -11:45 am	\$99	Ages 11-14
<input type="checkbox"/>	Session 3A:	July 15, 16, 17, 18	Time: 9 am – 10:15 am	\$99	Ages 8-11
<input type="checkbox"/>	Session 3B:	July 15, 16, 17, 18	Time: 10:30 am -11:45 am	\$99	Ages 11-14
<input type="checkbox"/>	Session 4A:	July 22, 23, 24, 25	Time: 9 am – 10:15 am	\$99	Ages 8-11
<input type="checkbox"/>	Session 4B:	July 22, 23, 24, 25	Time: 10:30 am -11:45 am	\$99	Ages 11-14
<input type="checkbox"/>	Session 5A:	July 29, 30, 31, Aug 1	Time: 9 am – 10:15 am	\$99	Ages 8-11
<input type="checkbox"/>	Session 5B:	July 29, 30, 31, Aug 1	Time: 10:30 am -11:45 am	\$99	Ages 11-14
<input type="checkbox"/>	Session 6A:	August 5, 6, 7, 8	Time: 9 am – 10:15 am	\$99	Ages 8-11
<input type="checkbox"/>	Session 6B:	August 5, 6, 7, 8	Time: 10:30 am -11:45 am	\$99	Ages 11-14

Student's NAME: _____ **Age:** _____

School Attended in 2019: _____ Grade completed in 2019: _____

Youth or Adult Tee Shirt Size (SMALL, MEDIUM, LARGE, XL): Youth _____ or Adult: _____

Does your child need to borrow clubs?, if **YES** RIGHT handed or LEFT handed

Parent's Name: _____ PHONE: _____

*** EMAIL please print neatly. PARENT'S EMAIL FOR CLASS INFORMATION and NOTIFICATIONS**

*** EMAIL: _____ \$99.00 Per Session Payment is non-refundable**



Mayor Joseph C. Sullivan

RECREATIONAL AND VOLUNTEERS ACTIVITIES RELEASE FORM

I, the undersigned _____, do hereby consent to my participation in voluntary or recreation programs of the Town of Braintree.

I also agree to forever release the Town of Braintree and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in any voluntary or recreation programs of the Town of Braintree ("the Releasees") from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to myself or property damage resulting from my participation in the
Town of Braintree's voluntary activities or recreational programs.

I also promise, to indemnify, defend, and hold harmless the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to myself or property damage resulting from
participation in the Town of Braintree's voluntary activities or recreation programs.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my participation is voluntary and that I am free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to participate in the Town of Braintree as a volunteer or in its recreation programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage that I may suffer in voluntary activities Town of Braintree or recreation programs.

Participant Signature or Parent/Guardian (if under 18):

Date:
