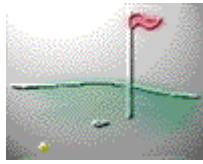


YOUTH GOLF AT SILVER CREEK GOLF CLUB



Again this summer, Silver Creek Golf Club, Seneca Falls Parks and Recreation and Waterloo Recreation have joined forces to offer a beginner's youth golf program for boys and girls grades 2 thru 5 (as of Sept. 2013).

Registrations will be accepted at **SILVER CREEK GOLF CLUB ONLY**. Please call Silver Creek (539-8076), the Seneca Falls Parks & Recreation Office (568-6933), or Waterloo Community Center (539-5309) with any questions.

PLEASE NOTE: Experienced golfers are needed to assist kids with this program. If interested, please call any of the above telephone numbers.

THE PROGRAM WILL BE DIRECTED BY NORM SHARMAN (OWNER/OPERATOR OF SILVER CREEK GOLF CLUB) AND HIS STAFF

\$25 FEE INCLUDES END OF PROGRAM COOKOUT

<p>SILVER CREEK WEDNESDAY MORNING YOUTH BEGINNERS GOLF CLINIC</p>
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- WEDNESDAY MORNINGS → JULY 10, 17, 24 & 31
- BOYS AND GIRLS ENTERING GRADES 2-5 (AS OF SEPTEMBER '13) AS WELL AS OLDER BEGINNERS
- TIMES: GRADES 2-3: 8:30-9:30 AM GRADES 4-5: 10-11:00AM

- **PLEASE NOTE:**

ON JULY 31st BOTH DIVISIONS WILL PARTICIPATE TOGETHER

→ TIME: 10am-12pm (includes cookout)

- GOLFERS WILL LEARN GOLF BASICS SUCH AS PROPER GRIP, STANCE, SWING, ETC., AS WELL AS GOLF ETIQUETTE.
- INSTRUCTION ON DRIVING RANGE AND PRACTICE GREEN
- SILVER CREEK WILL PROVIDE CLUBS FOR THOSE IN NEED

PLEASE USE REGISTRATION ON REVERSE SIDE

2013
WATERLOO/SENECA FALLS JR. GOLF CAMP
(CO-SPONSORED BY SENECA FALLS &
WATERLOO REC DEPARTMENTS)

REGISTRATION FORM

PLEASE PRINT:

GOLFER'S NAME _____ DOB ___/___/___ GRADE _____ (as of 9/1/13)

ADDRESS _____ MALE _____ FEMALE _____

HOME PHONE# _____ EMERGENCY# _____

PARENT/GUARDIAN DATA:

NAME _____ SPOUSE _____

ADDRESS _____

PHONE (DAY) _____ (EVE) _____

PHONE (DAY) _____ (EVE) _____

EMPLOYER _____

.....
MY CHILD HAS _____ YEARS OF GOLF EXPERIENCE - PLEASE DESCRIBE BELOW:

LIABILITY WAIVER

I, the undersigned, agree to let my child participate in the W'loo/SF Jr. Golf Camp. I understand and agree that SILVER CREEK GOLF CLUB OWNERS AND MANAGEMENT, as well as the SENECA FALLS and WATERLOO REC DEPARTMENTS, their DIRECTORS, COMMISSIONS and OTHER ORGANIZERS, shall in no way be held liable for any injury received at any time during the program, or in going to or from Silver Creek Golf Club. I understand that it shall be my responsibility to transport my child to and from Silver Creek Golf Club.

GOLF is a sport which involves extensive physical exercise. I understand it is my responsibility, through consultation with our family physician, to insure that my child is fit to participate in this program.

I do, hereby, assume all NORMAL risks and hazards incidental to the conduct of the above named program. I further release, absolve, indemnify and hold blameless SILVER CREEK GOLF CLUB, the SENECA FALLS and WATERLOO RECREATION DEPARTMENTS or any of the personnel appointed by their COMMISSIONS and/or GOVERNING MUNICIPALITIES.

_____ DATE

_____ SIGNATURE OF PARENT/GUARDIAN

RETURN WITH PAYMENT TO:
SILVER CREEK GOLF CLUB, 1790 E.RIVER RD., WATERLOO, NY 13165