



2008 Junior Golf Registration

Child's Name \_\_\_\_\_

Age \_\_\_\_\_

Years Playing Golf \_\_\_\_\_

Parent's Names \_\_\_\_\_

Address \_\_\_\_\_

Additional Address (optional) \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Child's Email (optional): \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Child has his/her own clubs: YES or NO

Group	Cost	FILL IN
July Session 9 Holers	\$275	!
July Session 5 Holers	\$260	!
July Session 3 Holers	\$240	!
August Session 9 Holers	\$275	!
August Session 5 Holers	\$260	!
August Session 3 Holers	\$240	!

Total Cost: \_\_\_\_\_

Payment Options:

Check Please return completed registration form and full payment to:  
Miacomet Golf Course  
12 West Miacomet Drive  
Nantucket, MA 02554  
(Checks payable to Miacomet Golf Course)

Credit Card  
Name \_\_\_\_\_  
Card # \_\_\_\_\_ exp date \_\_\_\_  
Signature \_\_\_\_\_  
Fax the completed registration form to 508-325-0087

Miacomet Member # \_\_\_\_\_ Fax the completed registration form to 508-325-0087

Registration and Enrollment Policy:

Registration is on a first come first serve basis. Program space is limited. All registrations require full payment and signed Parental Consent Form. A confirmation email will be sent when both of these are collected.

Refund Policy:

Partial refunds will be given according to the following schedule: (I) more than thirty (30) days before the first day of the session, full refund less administration fee of 10%; (II) between thirty (30) and ten (10) days before the first day of the session, seventy percent (70%) of the fee. No refunds will be given for cancellations received within nine (9) days of the first day of the session. Name changes are permitted at any time, without fee.

Parental Consent and Waiver:

In consideration of my child's participation, I hereby release the Nantucket Golf Academy, Moors Inc. d.b.a. Miacomet Golf, Nantucket Islands Landbank and any of their employees, instructors, agents, from any and all present and future claims resulting from its or their negligence or intentional acts and/or failures to act for property damage, personal injury, or wrongful death, arising as a result of my child engaging in or receiving instruction in Golf Camp activities. I hereby voluntarily waive any and all claims resulting from any such negligence or intentional conduct, both present and future, that may be made by my child, or family member. I certify that my child is in good health and is able to participate in physical activities. In the event of illness or injury, I grant permission for the staff to take appropriate action for my child's health and safety and to obtain any necessary medical assistance. I will be fully responsible for all medical expenses incurred by my child while attending the Junior Golf Program.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

For official use: Received by \_\_\_\_\_ Date Received \_\_\_\_\_ Delivery via \_\_\_\_\_

Information:

**July Session,**

Four Mondays: July 2,9,16,23

**August Session,**

Four Mondays: August 6,13,20,27

Group	Classification	Approx Ages	Times
9 Holers	Boys and Girls who can shoot under 60	13 & up	2-4:30 pm
5 Holers	Boys and Girls whose abilities warrant more than 3 holes	10-12	2:30-4:30pm

3 Holes	Boys and Girls whose abilities warrant less than 5 holes	7-9	3:15-4:30
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Questions:

For any questions regarding which group to place your child, schedules, make-ups or any of the details of our junior golf programs contact Phillip @ 954-817-3636 or Agilitygolf@aol.com

