

Junior Golfer

Name

Phone

Email*

Age _____ Golf Clubs if Required _____

Male Female Left Right

*Provide only if you want to receive emails from The Dunes Golf & Winter Club. Please note: this is how we will contact you about updates, events and specials.)

Parent or Guardian

Name

Phone

Email*

*Provide only if you want to receive emails from The Dunes Golf & Winter Club. Please note: this is how we will contact you about updates, events and specials.)

SELECT PROGRAM

After-School Junior Program

Dates: May 4-11-18-25
Day: Tuesday
Age: 6-10
Time: 4:15-5:15 pm

Dates: May 4-11-18-25
Day: Tuesday
Age: 11-15
Time: 5:30 - 6:30 pm

After-School Junior Program

Dates: June 1-8-15-22
Day: Tuesday
Age: 6-10
Time: 4:15-5:15 pm

Dates: June 1-8-15-22
Day: Tuesday
Age: 11-15
Time: 5:30 - 6:30 pm

PLEASE NOTE:

The 11-15 year old groups will have 3 or 4 holes of on-course play.

Payment Methods:

Payment Type

Cash Debit Cheque M/C VISA Amex

Card Number

Expiry (M/Y)

CVC*

Signature

Transaction Number
(For Internal Use Only)

For more information contact:

The Dunes Golf & Winter Club
780.538.4333

Email Entry to:

golf@thedunes.ca

Transaction Numbers

*For Visa and MasterCard cards, the card code is the last 3 digit number located on the back of your card on or above your signature line. For an American Express card, it is the 4 digits on the FRONT above the end of your card number.

Photo Release Form for Minors (if under 18)

The Dunes Golf & Winter Club has my permission to use my or my child's photograph publically to promote The Dunes Golf & Winter Club Junior Golf Academy programs. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

I consent to having my child photographed for this event.

Parent/Guardian's Signature

Date

Parent/Guardian's Name

Child's Name

Phone Number