

2017  
JUNIOR GOLF CENTER  
AT  
PINE LAKE GOLF  
**REGISTRATION FORM**

\_\_\_\_\_  
DATE

CHILD'S FULL NAME:	
MAILING ADDRESS:	
PHONE:	PHONE:
EMAIL:	
CHILD'S AGE:	DATE OF BIRTH:
PARENTS NAME:	

**EMERGENCY CONTACT INFORMATION**

<b>CONTACT NAME:</b>
<b>RELATIONSHIP TO CHILD:</b>
<b>PHONE NUMBER:</b>

I \_\_\_\_\_ ACCEPT FULL RESPONSIBILITY FOR  
THE BEHAVIOR OF MY CHILD.

CONTACT DAVE MALONE IF YOU NEED ASSISTANCE IN DETERMINING  
WHAT CLASSIFICATION IS APPROPRIATE FOR THE JUNIOR GOLFER.

402-560-3371

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