

## Junior Golfer Information

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Grade: \_\_\_\_\_

Level of Golf Experience: \_\_\_\_\_

\_\_\_\_\_

## In Case of Emergency

Notify #1: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Notify #2: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Family Doctor: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_