



## 2018 GOLF SUMMER CAMPS REGISTRATION FORM

Thank you for choosing Mt. Anthony Country Club Summer Camps! The purpose of the MACC Camps is to provide a fun and healthy environment to learn golf, swim, make new friendships and enjoy our beautiful natural surroundings.

Please return completed Registration Form to MACC office by May 31, 2018. There is limited availability per session. We cannot reserve spots unless a complete registration and payment is received together by due date. Please include your payment for each camper registered. Please make check out to Jack Ralbovsky.

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

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

Any Golf Experience : Yes / No Camper has Golf Clubs? Yes / No Right handed or Left handed

Does Camper know how to swim : Yes \_\_\_/ No\_\_\_. Does Camper have any allergies \_\_\_\_\_

Child lives with: \_\_\_\_\_ Counselor-in-Training Applicant: Y / N

Father/Mother /Guardian Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

How did you hear about our camp: Website Email Ad Facebook Camp Fair Newspaper

**Please indicate which camp session your child is registering to attend. 9 am - 3 pm**

**SESSION 1:** Mon. July 16 - Fri. July 20, 2018      **SESSION 2:** Mon. August 6 - Fri. August 10, 2018

**COST: Members \$180 \*** Discounted price for campers who are current active 2018 GOLF members

**Not yet Members \$200** Cash or check made out to Jack Ralbovsky

I hereby certify that all information on this application, and all information submitted as part of this application, is complete and accurate. The applicant has my approval to participate in all regular club activities including swimming and hiking. His/her name or picture may appear in Club website or Social Media or local news publications. If you have concerns about the use of pictures of your child, please inform Maru Leon. I realize it is my responsibility to consult a physician to assess my child's health relating to participation. I agree to hold harmless Mt. Anthony Country Club or their employees, volunteers and agents for any/all injuries and damages incurred during said program.

\_\_\_\_\_  
Parent Signature

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