



Bulldog Golf Camp

June 12, 19, 26, July 10

Family Registration Page

Name of Golfer(s): _____

Age(s): _____

Grade(s): _____

Do you have kids golf clubs? _____

Will you attend all 4 sessions? _____

Name of Parent / Guardian _____

Email Address: _____

Emergency Cell Phone # _____

Number of Golfers _____ x \$99.00 = _____ total due.

Please make checks payable to : Brighton Area Schools

Payment due on or before 1st day of camp—June 12th.

Campers must provide their own insurance. I hereby authorize the Brighton Boys Golf Youth Camp personnel to act for me according to their judgment in any emergency requiring medical attention for my child.

Parent/Guardian Signature _____

Type of Insurance _____

Policy # _____

I don't hold the personnel, Brighton Area Schools or anyone associated with the Brighton Bulldog Golf Camp responsible for any injury occurring to my child while under their direction.

Parent/Guardian Signature: _____ Date: _____

Space is limited, email registration / reserve your space

brightonboysgolf@gmail.com or mail registration page to

Brighton Athletics, 7878 Brighton Rd. Brighton, MI 48116

Proper golf attire required at all times for golfers and observers.