



FALL GOLF REGISTRATION

Instructor: TGA Golf

Location: Upper School – outdoors

Dates: Thursdays Sept. 21st through October 26th

Grades: K – 2nd	4pm – 5pm
3rd – 5th	5pm – 6pm
6th – 8th	6pm – 7pm

Golf Instruction Registration Form

Make Checks Payable to: Borough of Englewood Cliffs - \$150 per child

Mail or Hand Deliver to: Englewood Cliffs Borough Hall
482 Hudson Terrace,
Englewood Cliffs, NJ 07632

Please include proof of age and residency

Childs Name _____ Age: _____ Grade: _____ M or F: _____

Right or Left Handed: _____

Address: _____

Parent/Guardian: _____ Cell Phone: _____

Email: _____ (please print clearly)

I/We the parents of the above named candidate for a position in the Englewood Cliffs Golf Program hereby give my/our approval for his participation in any and all golf activities during the 2017 season. I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the Golf Instruction Program, Affiliated Golf leagues, organizers, sponsors, coaches, participants and persons transporting my/our child to or from related activities for any claim arising out of injury to my/our child to the extent an in the amount covered by accident or liability insurance.

I agree to return all uniforms/equipment issued to my/our child as requested by program officials or coaches.

Parents Signature: _____ Date: _____