

June 18-21, 2018 • July 23-26, 2018

AGES 7-15 (9 am - 2 pm each day)

TOIYABE GOLF CLUB

Summer is here! Join the Toiyabe Golf Club professional golf staff for camps full of golf, adventure and fun!

Golf camps open to the public. Junior golfers will learn the fundamentals and proper etiquette of golf each morning of camp. Lunch will be served each day and the afternoons will be complete with off-site activities.

We will focus on introduction to rules of golf, full swing and short game as well as have a skills challenge. Off-site adventures will include bowling, nature walks and museum tours, plus swimming and a BBQ at Bowers Mansion Park on the final day of camp. Join us for summer fun!

> \$245 per child per week Members \$225 per child per week

Register with the Golf Shop (775) 884 - 4597 info@toiyabegolfclub.com/

19 LIGHTNING W RANCH ROAD

WASHOE VALLEY, NV 89704

WWW.TOIYABEGOLFCLUB.COM



Participant Name	Age	Birthdate	
Parent's Name(s)			
Address	City	State Zip	
Phone Email			
Emergency Contact (other than parent) Name		Phone	
Please list any allergies or medical conditions	Bi	ringing an epi-pen? Yes or No	

Toiyabe Summer Camp - Golf & Adventure, ages 7-15

□ Camp 1 (June 18-21, 2018)

□ Camp 2 (July 23-26, 2018)

Parental Permission Form

This section must be completed by parent/guardian for all program registrations.

I certify that my child is healthy and free of problems that could inhibit participation in the Toiyabe summer camps. In case of injury, I wish to be contacted as soon as possible at the telephone number listed above. If I cannot be reached, please contact the emergency number that I have listed as a secondary contact. I give Toiyabe Golf Club permission to treat my child and/or make medical decisions in the event of an emergency if I or the emergency contact can not be contacted. In the event of serious illness or injury, and so that my child may be sent to a local hospital via ambulance, I understand that I am responsible for all charges. The campers may be traveling to other areas off Toiyabe Golf Club property, which I give permission for my child to be transported within a 15 mile radius of Toiyabe Golf Club. I give permission to Toiyabe Golf Club to photograph my child who is participating in a Toiyabe summer camp. I give permission to use the photographs of my child for promotional purposes, including but not limited to the Toiyabe website, newsletter, Summer camp fliers and other marketing communications as well as social media outlets.

Signature

Date _____

Cancellation Policy

Full payment for camp due at time of sign up. Cancellation must be in writing to Dave LaFata, Director of Golf, <u>dlafata@toiyabegolfclub.</u>com 7 days prior to the first day of camp. You will be refunded the camp cost less \$50 deposit.

Return completed form to: Toiyabe Golf Club Kids Camp Make checks payable to: Toiyabe Golf Club Mail: 19 Lightning W Ranch Road, Washoe Valley, NV 89704 Fax: 775-882-2388 Email: <u>dlafata@toiyabegolfclub.com</u>

Contact the Toiyabe Golf Shop with any questions or concerns 775-884-4597

Member Charge
Member #: _____

Paid with Check Check #: _____