

SANFORD SPORTS CAMP

2010 GOLF CAMP APPLICATION

PLEASE ENROLL MY SON / DAUGHTER IN THE FOLLOWING CAMP: **\$395 PER SESSION**

(Includes greens fees for Country Club)

8 - 14 year olds

June 21

Students are to provide their own clubs and to dress appropriately
(Khaki shorts or long pants and collared shirts).

Aug. 9

Camper's Name: _____

Parent's Name: _____

Age: _____ Shirt Size (Indicate child or adult size): _____

FREE SHIRT (ONLY if enrolled by June 1)

Address: _____

City: _____ State _____ Zip _____

Phone Number: Home _____ Work _____

Signature of Parent or Guardian _____

Will your child need transportation _____ Yes _____ No (\$75 per week) EXTENDED DAY: Yes _____ No _____

Will your child be attending the day camp? _____ Yes _____ No LUNCH: Yes _____ No _____ (\$30 per week)

How did you hear about this camp? _____

Indicate permission to swim: _____ Yes _____ No

Each application must be accompanied by a non-refundable \$50.00 deposit with the balance due on or before June 1.
Enrollments are limited and will be handled on a first-come basis.

Medical Release: I have completed the first page of the Health Information/Medical Release Form and by my signature agree.

Signature: _____ Date: _____