

# Jacaranda Golf Club

## Summer Break Junior Golf Camp



*Escape to Excellence*

Session 1: 6/11/18 to 6/15/18

Session 2: 7/16/18 to 7/20/18

Session 3: 8/6/18 to 8/10/18



*Escape to Excellence*

### GET YOUR JUNIOR GOLFER HOOKED



#### Golf Camp Instructors

**Bryan Sienkiewicz**: 1<sup>st</sup> Assistant, NSU  
University School Assistant Golf Coach, PGA  
PGM Apprentice.

**Harrison Kovelman**: Assistant Golf  
Professional, Graduate of Golf Academy of  
America.



### Pre Registration Required

To Pre Register Please Email [bsienkiewicz@jacarandagolfclub.com](mailto:bsienkiewicz@jacarandagolfclub.com)

Minimum of 3 juniors for camp to commence

\*\*\*\*\*

### Camps Include

- \*Full Swing Analysis
- \*Chipping
- \* Putting
- \*Golf Course Etiquette
- \*Rules of Golf
- \* On Course Instruction

### Junior Camp Session & Rates

Session will take place Monday – Friday from 9 am until 2 pm (AGES 6- 17 )  
Lunches provided

\_\_\_\_\_ ½ Day (9am- 11:30am) \$75 (lunch not included)

\_\_\_\_\_ Full Day \$90

\_\_\_\_\_ Weekly \$350

For additional information, please contact Jacaranda Golf Club. Pro shop: 954.472.5836 or email at [bsienkiewicz@jacarandagolfclub.com](mailto:bsienkiewicz@jacarandagolfclub.com) 9200 West Broward Blvd, Planation FL 33324

# Jacaranda Golf Club Junior Camp Application

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, ST Zip: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Guardian: \_\_\_\_\_ Phone#: \_\_\_\_\_

In Case of Emergency, notify \_\_\_\_\_ Phone#: \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Phone#: \_\_\_\_\_

If you cannot be notified, may your child be transported to a local hospital in case of an emergency?  
YES or NO (please circle one)

Please provide the name(s) of individuals whom you give permission to pick up your child:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

**If you are only signing up for a Daily package , please identify day(s) below:**

## RELEASE AGREEMENT

NOTE: No student will be permitted to receive golf instruction until this form has been completed by his/her parent and/or guardian.

I, \_\_\_\_\_ (relationship to child \_\_\_\_\_), have enrolled

\_\_\_\_\_ (student's name) in the Jacaranda Golf Club Junior Golf Summer Camp Sessions to be held during the Summer of 2018. I understand that golf instruction will be under the strict supervision of Jacaranda Golf Club personnel and that ***summer golfing activities outside of the clinics will be unsupervised.*** In addition, I understand that every effort will be made to avoid any accident; however, I further understand that Jacaranda Golf Club and/or its owner are not to be held liable should an accident occur. I expressly acknowledge that my child's participation in sports activities or presence on property intended for sports activities may subject him/her to hazardous and/or dangerous conditions such as damages, injuries or loses that the child may incur as a result of, among other things, lightning or weather conditions, being struck by foreign objects (including, but not limited to, golf clubs, sports equipment and the like). I do hereby release and agree to indemnify and save harmless Jacaranda Golf Club, Scratch Golf, LLC, its sole member, United Golf, Inc., and The United Company and their respective subsidiaries, affiliates, related corporations, agents, officers, shareholders, directors and employees from and against any and all losses and/or liability for claims, demands, suits or causes of action in law or in equity for damages and injury, including death, of every kind and nature, whether to persons or property, arising out of or in any manner related to the student receiving golf instruction at Jacaranda Golf Club.

Signature \_\_\_\_\_ Date \_\_\_\_\_