

2018 WINTER SEASON



DISNEY'S JUNIOR GOLF CLUB

Walt Disney World® Golf is offering a series of JUNIOR INSTRUCTIONAL GOLF CLUBS THIS WINTER!

A fun, educational way to improve your kid's golf game and help them reach goals, this is a magical opportunity to take it to the next level.

SPACE IS LIMITED, SIGN UP TODAY!

407-WDW-Golf (407-939-4653) www.golfwdw.com FOUR-WEEK SESSIONS, ONCE A WEEK

WEDNESDAYS
11/28–12/19 • 4-5p
Short game & full swing
\$100 per person
\$90 DVC/Military/Cast

• OR •

• SATURDAYS • 12/1–12/22 • 11a-12p Short game & full swing \$100 per person \$90 DVC/Military/Cast

PGA Instruction for ages 7-17

Performance-based practice that teaches skill development, performance training, and on-course management











WALT DISNEPWorld. G O L F

JUNIOR GOLF CLUB SIGNUP FORM 2018 WINTER SEASON



Which Session of Cam	p?	/s 11/28–12/19 ∟	」 Saturdays 12/1−12/22	
Junior's Name:				
Date of Birth & Age				
Address				
School Name & Grade				
Parents' Names				
Home Phone				
Cell Phone				
Email Address				
Special Notes or Comments				
How did you hear about the Camp?	Orlando Sentinel	Disney's Eyes and Ears	golfwdw.com web page	
	Friend Referral	Facebook	Email	
	Other:			
Continued on next page - please be sure to complete entire document				

FOUR-WEEK SESSIONS, ONCE A WEEK

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Short game & full swing \$100 per person \$90 DVC/Military/Cast

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Please return this form by email to: mschlager@palmergolf.com







WALT DISNEPWORLD. JUNIOR GOLF CAMP RELEASE FORM



CENTURY APGM, LLC DBA WALT DISNEY WORLD GOLF (THE "COURSE")

Medical Information – Minor/Participant			
Known allergies/sensitivities:			
Current medications and dosage amounts*:			
Current medical conditions:			
Additional information relevant to care, including medical history or special conditions/needs:			
Name of physician:	Phone:		
Names of people to whom Participant may be released (must be at least 16 years old and ID will be	e required):		
Name:	_ Phone:		
Name:	_ Phone:		
*if child needs medication during the Activity/Event, a completed Consent to Administer Med	ication form is required		
ASSUMPTION OF RISK, RELEASE AND INDEMNIFICATION AGREEMENT			
Assumption of Risk: Representative and Participant are aware that the Activity/Event involves inherent risks, dangers, and hazards that can result in serious personal injury or death. Representative and Participant are also aware that the Course facilities and/or equipment contain dangers and can cause serious injury or death. Representative and Participant hereby freely agree to assume and accept all known and unknown risks of injury arising out of the Activity/Event, including injury or death that results from the Course's negligence, design of the facility and/or equipment, or from any third party.			
Release and Indemnity: In exchange for the Course allowing Participant to participate in the Activity, Representative, individually and on behalf of Participant as well as any respective family members, heirs beneficiaries, assigns and all parties claiming by, through or under either Representative or Participant, does hereby RELEASE, INDEMNIFY AND HOLD HARMLESS the Course, its parent, affiliated and subsidiary companies as well as all of their respective officers, directors, agents, contractors, employees, heirs, successors, assigns, volunteers and guests from all liability for any injury, death, loss or damage connected in any way whatsoever to Participant's participation in the Activity/Event, including that which may result, directly or indirectly, in whole or in part, from the negligence or willful misconduct of the Course or any third party, or from the design of the facility and/or equipment, whether on or off the Course's premises and including any transportation.			
Medical Consent: Representative hereby gives consent to the Course to obtain all emergency medical care and trans as the Course may deem appropriate, and Representative hereby accepts full responsibility for the payment of all cosprovisions set forth hereinabove shall extend to any damage or loss arising out of the medical treatmemergency, including the negligent acts or omissions of any health care providers, their agents, employed.	ts for same. The release, indemnity and hold harmless ent and transportation provided in the event of an		
Property Loss: All personal property brought to the Activity is brought at the sole risk of the Participant as to its the	ft, damage or loss.		
<u>Photograph Release</u> . Representative hereby grants permission to and releases the Course to use, without limitation that may include Participant's image or voice for purposes of promoting the Course's programs.	n or obligation, photographs, film footage or tape recordings		
Severability: Any provision or portion of this Agreement found to be invalid by the courts having jurisdiction shall be invalid only with respect to such provision or portion. The remaining provisions or portion hereof, shall be construed and enforced to the same effect as if such offending provision or portion thereof had not been contained herein.			

Date:

Representative hereby executes this Agreement on behalf of Representative and Participant.

Signature of Representative: