



Junior Golf Program 2022

Time: 9am-11:30am

Dates: June 15th and 16th- August 3rd

Location: 1100 Ramshorn Drive. Fremont, MI 49412

Ages: 7-18 years

Dear Parents,

Waters Edge is proud to provide a great opportunity for junior golfers to expand and improve their golf knowledge and abilities. In our Junior Program, the less experienced golfers will learn basic golf instruction, USGA rules, and proper course etiquette. Intermediate to advanced golfers will improve their skills, prepare for competitive golf, and participate in weekly competitions.

Due to continued interest, we will be splitting the Junior Program into two days: Wednesday for the younger and less experienced golfers, Thursday for older and more experienced golfers. At the time of registration, please indicate whether your golfer is a beginner or has been playing for some time. This way we can make sure golfers are grouped together in their appropriate skill level groups.

The fee for the 2022 Junior Program will be \$120. This fee covers professional instruction, and all other associated costs. If there is a possibility for inclement weather, we will announce a cancellation for that day on our Facebook Page by 8:30 am on the day of.

To reserve your child's place in the class, please return this form and registration fee by **Wednesday June 8th, 2021**. Checks can be made out to Waters Edge Golf Course.

Please return your completed forms to the Pro Shop or call (231)924-2640 to reserve a spot for your child. If you have any questions, you can either call the number listed above or email me @ rick@watersedgefremont.com

Rick Content
PGA Director of Golf Performance
Waters Edge Golf Course



2022 Consent Form

Golfer's Name: _____ Age: _____

Phone: _____

Address: _____

Course Member: Yes / No

Parent/Guardian #1: _____ Phone: _____

Parent/Guardian #2: _____ Phone: _____

Emergency Contact #1: _____ Phone: _____

Emergency Contact #2: _____
Phone: _____

Does your child have any allergies/medical information we need to be aware of?

Family Physician: _____

In the event of an emergency and I am unable to be reached, the representatives of Waters Edge Golf Course have permission to obtain emergency medical services for my son/daughter:
Yes / No

Parent or Guardian Signature _____

Date _____

Parent or Guardian Email _____

_____ I give permission for my child's picture to be taken and put on Waters Edge website and Facebook.

_____ I do not want my child's picture taken and put on Waters Edge website and Facebook.

My child is a _____ Beginner or _____ Intermediate golfer