



MIAMI SHORES GOLF COURSE

Director of Golf: **Kyler Booher**
402 E Staunton Rd, Troy, OH 45373
(937) 335-4457



2019 JUNIOR GOLF REGISTRATION

PERSONAL INFORMATION

Student Name _____

Parent/Guardian Name _____

Age

Birthdate

Male

Beginner

_____ years

_____/_____/_____

Female

Plays Occasionally

Plays Often

Mailing Address _____

Contact Phone Number

Email Address

(____)_____-_____ _____

MEDICAL INFORMATION

Emergency Contact—Name and Phone Number

Family Physician—Name and Phone Number

Medical Information—Allergies, etc.

REGISTRATION FEE—\$50

Cash

Credit Card

Check (Make checks payable to Kyler Booher)

PARENT/GUARDIAN SIGNATURE

DATE

_____/_____/_____