2016 Silverwood Future Links Junior Golf Registration Form

Name:		Pare	nt:			
Home Phone:		Altei	rnate #:			
Age:	Male or Female:		_ Right or Left Handed:			
Do you have	your own golf clubs?:	Yes		No		
I would like to register for the following Class # (1-7) or day:				y: -1 st C	-1 st Choice	
				-2 nd (Choice	
				-3 rd (Choice	
Junior Lesso Golf Course,	e consent to have my con Program and will not its Staff, the Range, conjury to my child.	hold the City	of Saskato	on, the S	ilverwood	
Signature:						
(Parent or G			_			
Select (circle	e) Payment Type: Ca:	sh Debit	Cheque	Visa	Mastercard	
If payment is	s by cheque, please ma	ke cheque paya	ble to <u>Sha</u>	k Golf L1	<u>d.</u>	
AUTHORIZE	ED BY:					
(Pro-Shop S						