



Summer 2010 Junior Golf Camps

Camp Dates:

June 8, 9, 10 June 15, 16, 17 July 13, 14, 15 July 27, 28, 29

Camps are open to junior golfers ages 7-16

Camp Instructors:

- Dan Mullins:** 2001 Georgia PGA Professional of the Year. Over 30 years experience working with juniors. Tournament Director for the American Junior Golf Association 1978-1979. Teaching Professional
- Al Morrison:** Head Golf Professional, City Club Marietta. Al became a PGA Class "A" Member in 1997 and carries over 15 years of teaching and playing experience.

Camp Agenda:

- First Day:** 9:00-9:30 Rules of Camp, Rules of Golf, & Golf Course Conduct
9:30-11:00 Rotate through stations - full swing, chipping, putting, & sand play
11:00-12:00 Play Golf
- Second Day:** 9:00-10:00 Review and warm up
10:00-11:00 Rotate through stations - full swing, chipping, putting, & sand play
11:00-12:00 Play Golf
- Third Day:** 9:00-10:00 Review and warm up
10:00-11:00 Rotate through stations - full swing, chipping, putting, & sand play
11:00-12:00 Skills Competition

**Price: \$150 per camp - Includes golf, lunch, snacks, and prizes for each player.
For Information Call City Club Marietta- 770-528-4653 ext. 4 or 5**

Summer 2010
City Club Marietta Junior Golf Camp
Registration Form

Camp Selection: (circle)

June 8,9,10

June 15,16,17

July 13,14,15

July 27,28,29

Students Name: _____ Age: _____

Right Handed _____ Left Handed _____ Has Clubs _____ Needs Clubs _____

Payment Method: Check _____ Visa/MC/AMEX _____ EXP _____

Parent/Guardian: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Day Time Phone (in case of emergency) _____

EMAIL: _____

Medical History and Release Form

My permission is granted for the camp supervisors to obtain medical attention in case of sickness or injury of my child.

I release and waive, and further agree to indemnify, hold harmless or reimburse City Club Marietta, Classic Golf Management, the City of Marietta, and the instructors, or any other staff, from and against, any claim which I, any other parent or guardian, any sibling, the child, or any other person, firm or corporation, may have or claim to have, known or unknown, directly or indirectly, from any loses, damages or injuries arising out of, during or in connection with the child's participation in the camp or the rendering of emergency medical procedures or treatment, if any.

DATED this _____ of _____, 2010

Signature of Parent/Guardian

Please list any allergies or medical conditions: _____

Special Instructions for Child: _____
