



# PVGC SATURDAY CLINIC REGISTRATION FORM



(June 1<sup>st</sup> - August 31<sup>st</sup>, 2024)

**JUNIOR CLINIC @ 10:00am: \$30.00 per Student per Session**

**ADULT CLINIC @ 11:00am: \$40.00 per Student per Session**

**NAME:** \_\_\_\_\_ **PHONE:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **D.O.B.** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

**EMERGENCY CONTACT NAME:** \_\_\_\_\_

**EMERGENCY CONTACT PHONE:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**PLEASE CHECK ONE**

**Junior Clinic:** \_\_\_\_ **Adult Clinic:** \_\_\_\_

***Please return this form to Brad Heninger to confirm your entry!***

***Email: [bradheninger@gmail.com](mailto:bradheninger@gmail.com) / Phone: (321) 830-3198***