



PVGC JUNIOR 4-WEEK PROGRAM REGISTRATION



NAME: _____ PHONE: (_____) _____ - _____

EMAIL: _____ D.O.B. ____ / ____ / _____

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE: (_____) _____ - _____

SESSION: ____ DAYS: _____ & _____ TIME: ____:____ PM

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

Email: bradheninger@gmail.com / Phone: (321) 830-3198

Session 1: **August 12th - September 7th**
Monday & Wednesday or Tuesday & Thursday
Group Range Instruction @ 3:00pm
Saturday Course Play @ 5:00pm

Session 2: **September 9th - October 5th**
Monday & Wednesday or Tuesday & Thursday
Group Range Instruction @ 3:00pm
Saturday Course Play @ 5:00pm