



Collins Hill Junior League Golf Academy  
Registration Form

**Student Information**

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent Name \_\_\_\_\_

**Contact Information:**

Parent Phone #: \_\_\_\_\_ Cell \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Cell / Phone \_\_\_\_\_

**Payment Information:**

Credit Card Info:    Visa        AMEX        MasterCard        CC# \_\_\_\_\_

Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_

Zip Code \_\_\_\_\_

The Collins Hill Junior League Golf Academy gives you the opportunity to attend an unlimited number of CHJLG clinics during month of billing. If joining after the 15<sup>th</sup> of the month the student may attend classes as space is available for a cost of \$25 per clinic or pay the full \$75 for unlimited classes. Class times may be limited if clinics are not full. (Example: One student in clinic, class time would be 30 minutes. If 2 students attend, class time would be 45 minutes. If 3 students attend, class time would be one hour. 4 or more students attend, class time is 90 minutes.) Cost of the academy is \$75 and will be billed automatically at the beginning of each month unless notice is given one week in advance to withdraw from the academy.

By signing below I hereby give Scott Hare, PGA the permission to charge my credit card \$75 per month until I submit my one week notice of withdrawal from the Collins Hill Junior League Golf Academy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_