

**2017 Raymond Memorial GC**  
**June Competitive Junior Golf Camp**

Kelly L. Trent, the Premier Junior Golf Instructor in Central Ohio, is offering a 4-day golf camp for junior golfer's ages 11-18 that desire to play competitive golf for their school. This camp offers juniors the opportunity to hone their skills in order to be prepared for school golf tryouts on August 1<sup>st</sup>. A strong focus will be on game management skill development while they play golf. The end goal is to have the junior golfer prepared physically and mentally for their fall golf season. All four days will consist of 2.5 hours of instruction, lunch, and 18 holes of supervised on-course play. The student teacher ratio is no more than 10:1. This camp is not intended for novice golfers.

Please fill out the enclosed application. All checks should be made out to Kelly Trent Pro Shop in the amount of \$370.00 (no refunds).

**DEADLINE TO REGISTER: MAY31<sup>TH</sup>**

<b>MONDAY</b>	<b>June 19:</b>	<b>8:00 A.M. - 3:00 P.M</b>
<b>TUESDAY</b>	<b>June 20:</b>	<b>8:00 A.M. - 3:00 P.M</b>
<b>WEDNESDAY</b>	<b>June 21:</b>	<b>8:00 A.M. - 3:00 P.M</b>
<b>THURSDAY</b>	<b>June 22:</b>	<b>8:00 A.M. - 3:00 P.M</b>

Registration is on a first come first served basis. We need to have at least 10 juniors to have a camp. Please call 614-832-7569 if you have any questions and ask for Kelly Trent, L.P.G.A. Head Professional.

**RAYMOND MEMORIAL GOLF COURSE  
2017 COMPETITIVE GOLF CAMP APPLICATION  
June 19-22, 2017**

NAME \_\_\_\_\_

HOME PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_

MALE \_\_\_\_\_ FEMALE \_\_\_\_\_ BIRTH DATE \_\_\_\_\_ AGE \_\_\_\_\_

PARENT NAME \_\_\_\_\_ WORK PHONE \_\_\_\_\_

PARENT NAME \_\_\_\_\_ WORK PHONE \_\_\_\_\_

**FEE: \$370.00 (NO REFUNDS)** Check One \_\_\_\_\_ CASH \_\_\_\_\_ CHECK (Payable to Kelly Trent Pro Shop)

**MAIL TO: KELLY TRENT  
2584 EDINGTON RD  
COLUMBUS, OH 43221**

**IN CASE OF EMERGENCY:**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

**I UNDERSTAND THAT BY SIGNING THIS APPLICATION, I CERTIFY THAT ALL THE ABOVE INFORMATION IS CORRECT AND THAT THE PERSON IS PHYSICALLY FIT TO COMPETE IN GOLF. ALSO BY SIGNING, I DO HEREBY, FOR MYSELF, EXECUTORS, ADMINISTRATORS AND PERSONS, WAIVE RELEASE AND FOREVER DISCHARGE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES, WHICH MAY OCCUR, OR WHICH MAY HEREAFTER OCCUR, TO THE PERSON OR AGAINST THE COLUMBUS RECREATION AND PARKS DEPARTMENT VOLUNTEERS, RESPECTIVE OFFICERS OF THE CITY, RAYMOND MEMORIAL GOLF COURSE AND ALL PERSONNEL AND/OR ASSIGNED, FOR ANY AND ALL DAMAGES, WHICH MAY BE ATTAINED BY THE ATHLETE.**

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PARENT OR GUARDIAN