

Pleasant Valley High School
Elementary/Junior High Golf Clinic
Registration Form 2016



Date: June 6, 2016 **8:00-10:00am Grades 3&4 (max 20 students)**
10:00am-Noon – Grades 5&6 (max 20 students)
1:00-3:00pm – Grades 7&8 (max 20 students)

Location: Davenport Country Club

Cost: \$30.00 (includes a sleeve of PV Logo Golf Balls)

Please make check payable to Pleasant Valley High School and include with this registration form. Registration is due by June 3rd.

Online Registration Link: <https://pleasval.revtrak.net/tek9.asp?pg=athletics>

Athlete Name: _____ Age _____

Grade Level, Fall 2016: _____ Current School: _____

Home Address: _____

Home Telephone: _____ Email: _____

Parent/Guardian Name: _____ Work/Cell Phone: _____

Parent/Guardian Name: _____ Work/Cell Phone: _____

If unable to reach parent/guardian, in case of an emergency, contact:

Name: _____ Phone: _____

Medical Information/Release

Does the athlete have any medical conditions we need to be aware of? Yes No

If yes, please explain: _____

I authorize the Golf coaches at the Pleasant Valley High School Golf camp to act for me according to their best judgment in an emergency requiring medical attention, and I release Pleasant Valley Golf coaches as well as Pleasant Valley School District from any and all liability for injuries, illnesses, or lost property incurred while the above named athlete is at the clinic. I have no knowledge of any physical condition that would be affected by the above named athlete's participation in the clinic.

Parent/Guardian Signature: _____ Date: _____

Please send your camp registration to:

Mrs. Kim Meyer
Pleasant Valley High School Athletic Department
604 Belmont Rd, Bettendorf, IA 52722

For additional questions, please call Andy Ward, 309-945-6706 or email wardandrewj@pleasval.k12.ia.us.