WILCOX OAKS GOLF CLUB 2019 JUNIOR GOLF PROGRAM

Registration Form

Please Return to the Wilcox Pro Shop before June 11, 2019

Junior Golfer Name:		
Phone:	E-mail:	
Address:		
City:	Zip Code:	
Golfer Birthdate:	Age: Male Female	
School:	Grade:	
Liability Release form attache	d and signed the Parental Consent and ed hereto. I understand that Wilcox Oaks edical coverage for any accidents/injuries during this program.	
Dated:		
Parent/Guardian Signature	Printed Name	
(Fo	r Office Use Only)	
Non-Member Fee \$90.0	00 Member Fee \$60.00	
Received by:	WOCG Member Number	
Recommended Group:	New/Young Lightly Skilled Intermediate Advanced	

PARENTAL CONSENT/MINOR LIABILITY RELEASE AND INDEMNITY AGREEMENT

l,	, am the parent/legal guardian of
minor	I hereby give my permission for
said minor to use the golf course, driving range,	practice facilities and other facilities at Wilcox
Oaks Golf Club.	

In consideration for Wilcox Oaks Golf Club, the above-named club/golf course, and its respective owners, officers, directors, employees, agents, affiliates, related corporations, successors and assigns (collectively WOGC) allowing my minor child/ward to use the Golf club/golf course and participate in the sports, programs, events and activities at the club/golf course, I acknowledge, appreciate and agree on behalf of myself, my minor child/ward and our heirs, assigns and representatives and next of kin ("Participant") that:

- 1. ASSUMPTION OF RISK: The risk of personal injury or property damage from using the facilities at the club/golf course and participating in sports at the club/golf course is significant, INCLUDING THE POTENTIAL FOR PERMANENT PARALYSIS AND DEATH. Participant is aware and familiar with the game of golf, the rules and etiquette of the game and the risks involved in participating in the sport, including but not limited to the use of clubs, balls, carts and other equipment, natural or man-made hazards, and variations in terrain and surface conditions, Participant also recognizes that other participants pose a danger to Participant, including but not limited to errant golf balls and the close proximity of participants taking practice swings, Participant also understands and accepts that surface conditions on the golf course, walkways, stairs, sprinkler, natural habitat./animals, and other elements such that walking or other daily activities may become dangerous. Such risks and dangers are accepted whether they are marked or unmarked, hidden, latent or obvious. PARTICIPANT FREELY ASSUMES ANY AND ALL RISKS, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE NEGLIGENCE OF TGC OR OTHERS, AND ASSUMES FULL RESPONSIBILITY FOR PARTICIPANT'S USE OF THE GOLF COURSE AND PARTICIPATION IN THE SPORT.
- 2. **COMPLIANCE WITH RULES**: Participant agrees to comply with and abide by the rules and etiquette of the sports in which he/she is participating, and the rules, instruction and policies of the club/golf course.
- 3. RELEASE FROM LIABILITY AND CONVENANT NOT TO SUE: Participant agrees to FOREVER DISCHARGE AND RELEASE FROM ANY LEAGAL LIABILITY AND TO NOT SUE WOGC for any injuries, disability, death, loss or damage to person or property arising out of Participants access to the club/golf course or participation in the sports of the club/golf course, INCLUDING BUT NOT LIMITED TO INCIDENTS ARISING OUT OF WOGC'S ALLEGED NEGLIGENCE or by marked, unmarked, hidden, latent, or obvious defects on the premises or in the equipment used, to the fullest extent permitted by law.
- 4. **INDEMNITY AGREEMENT**: Participant agrees to **INDEMNIFY, DEFEND AND HOLD HARMLESS WOCG**, from any and all losses, allegations, claims, legal actions, proceedings, damages, judgments and liabilities of any kind ("Losses") that arise out of Participant's use of the club/golf course or participation in the sports at the club/golf course, except to the extent such Losses are caused by WOGC's gross negligence or willful misconduct. I agree to assume liability and responsibility for my minor child/ward's conduct, including any personal injury or property damage that may result for such conduct, and even though I may choose not be present or participate with said minor in the activities referenced above.

5. **MEDICAL CONSENT**: I give permission in the case of injury or similar emergency involving my minor child/ward for WOGC to administer CPR or first aid. In the event said minor requires medical attention, I hereby consent to any x-rays, medical treatment or diagnosis or hospital care to be rendered under the supervision of duly licensed physicians, dentists and/or paramedics. I understand that this medical authorization is being given in advance of any specific injury or illness.

PARTICIPANT IS AWARE THAT THIS AGREEMENT IS LEGALLY BINDING AND THAT HE/SHE IS RELEASING LEGAL RIGHTS FOR HIMSELF/HERSELF AND HIS/HER HEIRS BY SIGNING IT.

PARTICIPANT UNDERSTANDS AND AGREES THAT THIS AGREEMENT IS INTENDED TO BE AS BROAD AND INCLUSIVE AS IS PERMITTED BY LAW AND THAT IF ANY PORTION OR PARAGRAPH IS HELD INVALID, THE BALANCE SHALL CONTINUE IN FULL LEGAL FORCE AND EFFECT.

PARTICIPANT HAS READ, UNDERSTOOD AND AGREED WITH ALL OF THE ABOVE, AND SIGN THIS CONTRACT FREELY AND VOLUNTAILY WITHOUT ANY INDUCEMENT.

Dated	
Signature of Parent/Legal Guardian	Printed Name of Parent/Legal Guardian
PARENT/LEGAL GUARDIAN TELEPH	ONE NUMBER:
Emergency Contact Name and Telep	hone Number if Parent/Legal Guardian is not
Name (Please Print)	Phone Number