



OF OAK VALLEY
GOLF CLUB

Girls Golf Registration Form

Child's Name _____

Parents' Names _____

Emergency Phone Number _____ Do You Text? _____

Age of Child _____ Gender _____ Height _____

Address (please print) _____

Email Address (please print) _____

Allergies or Special Medical Needs _____

Shirt Size _____ Hat/Cap Size _____

Do you allow photos to be taken of your child? _____

If so, do you allow the release of those photos? _____

Please make sure that your child arrives 15 minutes before the scheduled class time; with water, sunscreen applied and a recent restroom break.

Please make checks out to Susan Sidden.