

2024 Silverwood Junior Golf Registration Form

Name: _____

Parent: _____

Home #: _____

Alternate #: _____

Age: _____

I would like to register for the following Class # (1-7) or day: -1st Choice _____

-2nd Choice _____

-3rd Choice _____

I hereby give consent to have my child participate in the **Silverwood Junior Lesson Program** and will not hold the City of Saskatoon, the Silverwood Golf Course, its Staff, the Range, or Instructors responsible in the event of an accident or injury to my child.

Signature: _____

(Parent or Guardian)

Select (circle) Payment Type: **Cash** **Debit** **Visa** **Mastercard**

AUTHORIZED BY: _____

(Pro-Shop Staff Only)