

**CAMPER'S REGISTRATION**Female      Male

Name \_\_\_\_\_ Age \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> New Camper                                     | <input type="checkbox"/> Return Camper |
| <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced      |

**NOTE:** Separate registration required for each camper.**PARENT/GUARDIAN 1****PARENT/GUARDIAN 2**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

**CAMP DATES 2025:** Please check the week(s) your child will attend.

- |   |   |
|---|---|
| <input type="checkbox"/> WEEK 1: April 28 – May 2   | <input type="checkbox"/> WEEK 8: August 4 – August 8    |
| <input type="checkbox"/> WEEK 2: June 16 – June 20  | <input type="checkbox"/> WEEK 9: August 11 – August 15  |
| <input type="checkbox"/> WEEK 3: June 23 – June 27  | <input type="checkbox"/> WEEK 10: August 18 – August 22 |
| <input type="checkbox"/> WEEK 4: July 7 – July 11   | <input type="checkbox"/> WEEK 11: August 25 – August 29 |
| <input type="checkbox"/> WEEK 5: July 14 – July 18  |   |
| <input type="checkbox"/> WEEK 6: July 21 – July 25  |   |
| <input type="checkbox"/> WEEK 7: July 28 – August 1 |   |

**PAYMENT SCHEDULE**

A \$50 deposit per week or payment in full for each week reserved is required with registration. **After April 7th** payment in full is required with registration and all final payments are due. **We will accept registrations right up to the start of any week providing there are openings.**

**TUITION & MISCELLANEOUS DUE**

- |  |         |
|--|---------|
| <input type="checkbox"/> Weekly Camp @ \$350 x Number of Weeks   | = _____ |
| <input type="checkbox"/> Season Pass @ \$2,475   | = _____ |
| <input type="checkbox"/> Camp Hat @ \$15 ea. x Qty   | = _____ |
| <input type="checkbox"/> Camp Golf Shirt Unisex @ \$30.00 ea. x Qty  | = _____ |
| <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> x Large |         |
| <input type="checkbox"/> Club Rentals @ \$30 per week x Number of Weeks =  | = _____ |

**TOTAL** \_\_\_\_\_**WAIVER AND RELEASE**

I have adequate medical insurance coverage and give my daughter/son permission to attend the Foster's Golf Camp. We (or I) agree to indemnify the golf courses attended, their employees, Foster's Golf Camp, and its instructors, for any claim which may hereafter be presented by my daughter/son as a result of such injuries. In addition, our daughter/son understands all the rules and regulations of Foster's Golf Camp and promises to conform to such rules. I authorize Foster's Golf Camp to photograph and/or videotape my daughter/son for use in publications and/or websites. I hereby authorize Ted Foster and/or instructors to act on my behalf, using the best judgment in any emergency requiring medical attention other than that maintained by the camp. I will be responsible for any charges incurred and will pay such charges arising from the medical care of my child.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Send registration & payment to:** Fosters Golf Camp~ 240 Tory Rd Manchester, NH 03104**Please note:** Given the limited space all sales are final, and deposits are non-refundable.**THE ULTIMATE JUNIOR GOLF EXPERIENCE! CELEBRATING 32 YEARS!**[www.fostersgolfcamp.com](http://www.fostersgolfcamp.com)