

SLEEPY HOLLOW GOLF CLINIC

sponsored by Pleasant Hill Park and Rec, East High, and Sleepy Hollow

Your kids can learn the game of golf from professional instructors!

**Learn the basics, with a focus on etiquette,
swinging, driving, chipping and putting**

**Plus, Get TWO extra rounds of golf to be
used before the end of the season!!!!**

Sleepy Hollow Golf Clinic Information

August 3rd - 5th - Instruction

August 6th - Play

Registration Deadline - July 27th

We have a maximum of 25 participants per section

Cost - \$75.00/Participant

Grade Levels - 5th & 6th; 7th & 8th; 9th & Up

Times - 5th/6th - 8:45-9:45

7th/8th - 10:00-11:00

9th/up - 11:15-12:15

Clinic Information

This clinic is rain or shine.

Focus on Etiquette, Swinging, Driving,

Chipping, and Putting



Registration

Please tear this off and turn it into Sleepy Hollow or the Pleasant Hill Park and Rec office.

Name _____ Parent/Guardian Name _____

Check appropriate age: 5th-6th _____ 7th-8th _____ 9th-Up _____

Address _____

Phone Number _____ Emergency Contact _____

Email _____

Payment Method: Cash _____ CC _____ Check _____

Amount Paid _____ (\$75 per person)

Please indicate if you have clubs or if you will need clubs : Have own _____ Need clubs _____

Height _____ Actual Age _____

Briefly describe your golf experience and what you hope to gain from this camp:

SLEEPY HOLLOW SPORTS PARK
RELEASE AND WAIVER OF LIABILITY
ASSUMPTION OF RISK AND INDEMNITY AGREEMENT FOR

All Seasonal Activity Passes (ASAP) including skiing, tubing, sledding, snowboarding, go karts, bumper boats, mini golf, golf, driving range, batting cages, climbing wall, haunted attractions, camping, canoeing, and any activity at Sleepy Hollow Sports Park

I desire to participate in the activities offered at Sleepy Hollow Sports Park. I understand those activities to include, but not be limited to ALL SEASON ACTIVITY PASS (ASAP). I understand that these activities at varying times range from recreational to competitive. It is my intent to participate in the activities at the level being offered on this date.

I am aware and fully understand that (ASAP) can be very dangerous. They involve the risk of damage, serious injury and death, both to me and to others. I understand there are many potential causes for property damage, serious injury and death at Sleepy Hollow Sports Park, including negligence of Sleepy Hollow Sports Park, its owners, employees, volunteer staff, rescue personnel, and equipment as well as my own negligence and the negligence of others.

In consideration of being permitted to participate in the activities (ASAP) offered at Sleepy Hollow Sports Park I hereby agree to release, waive, discharge, and covenant not to sue Sleepy Hollow Sports Park, its owners, agents, employees, or rescue personnel as well as any equipment manufacturers and distributors involved with the Sleepy Hollow Sports Park facilities from all liability from any and all loss or damage I may have and any claims or demands I may have on account of injury to my person and property or the person and property of others, including death, arising out of or related to the activities offered at Sleepy Hollow Sports Park, its owners, agents, employees, volunteer staff, equipment manufacturers, distributors or otherwise.

In consideration of being permitted to participate in the activities (ASAP) offered at Sleepy Hollow Sports Park I assume full responsibility for any risk of bodily injury, death, or property damage arising out of or related to the activities offered at Sleepy Hollow Sports Park. I assume full responsibility for any risk of bodily injury, death or property damage arising out of or related to the activities offered at Sleepy Hollow Sports Park whether caused by the negligence of Sleepy Hollow Sports Park, its owners, agents, employees, volunteer staff, equipment manufacturers, distributors or otherwise.

In consideration of being permitted to participate in the activities (ASAP) offered at Sleepy Hollow Sports Park I hereby agree to indemnify and save and hold harmless Sleepy Hollow Sports Park, its owners, agents, employees, volunteer staff, equipment manufacturers, and distributors from any loss, liability, damage, or cost they may incur arising out of claims generated while I participated in activities at Sleepy Hollow Sports Park whether caused by their negligence or otherwise.

In consideration of being permitted to participate in the activities (ASAP) offered at Sleepy Hollow Sports Park I agree that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by Sleepy Hollow Sports Park, its owners, agents, employees, volunteer staff, and equipment manufacturers and distributors, including negligent rescue operations and is intended to be as broad and inclusive as is permitted by Iowa law and that if any portion is held valid, it is agreed that the balance shall continue in full legal force and effect.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT AND INDUCEMENT, ASSURANCE, GUARANTEES OR WARRANTIES, EXPRESSED OR IMPLIED, BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

PARTICIPANT NAME

PARENT SIGNATURE

DATE