





1-908-241-8380 www.thelearningcenteratgallopinghill.com

Ash Brook Junior Program Release Form - Week #4

www.ashbrookgolfcourse.com

STUDENT NAME		MALE FEMALE
ADDRESS	CITY	STATE
ZIP	EMAIL	
CONTACT NAME	PHONE #	CELL
EMERGENCY #	STUDENTS DOB	AGE
WAIVER AND RELEASE: Acknowledging that participation in athletics carries risk of physical injury, I agree that Ash Brook Golf Course,		
KemperSports and County of Union, its agent	ts, commissioners and employees, shall not be liable to me o	or my child for any injury or damage,
howsoever caused, resulting directly or indirectly from my child's participation in the Ash Brook Junior programs, at any time preceding, during or		
after the program is in session and I herby discharge Ash Brook Golf Course, its agents, commissioners and employees from all actions, claims, and		
demands I or my child may have for such injury or damage. I authorize that Ash Brook Golf Course has the right to use all photographs or videos		
taken of my child during the academy for advertising or promotional material.		
PARENT OR GUARDIAN SIGNATUR	E:	
Additional information call 908-490-8620 or contact Baker Maddera, PGA at bmaddera@kempersports.com ALL COMPLETED AND SIGNED RELEASE FORMS MUST BE EMAILED TO bmaddera@kempersports.com		

