

In order to participate in the tournaments you must join the association and complete the application form below for EACH player. Association applications must be received before or included with the first tournament entry.

The Application Fee

\$75.00 for the first player in the family

\$25.00 for each additional player

Example: If your family has 3 players who would like to join the following would apply:

\$ 75.00	= 1 st player fee
\$25.00	= 2 nd player fee
\$25.00	= 3 rd player fee
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\$125.00	Total

Send all entries and make checks payable to:

Hamilton County Junior Golf Association
P.O. Box 813
Fishers, IN 46038
317-440-7068

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Hamilton County Junior Golf Association Application

\$75.00 for the first player

\$25 for each player after the first

Name _____ Please Circle Boy or Girl

Address _____ City _____ Zip Code _____

Home Telephone _____ Age _____ Date of Birth: (___/___/___)

Parental Consent in the event of medical emergency and release

Name _____ Telephone Number () _____ - _____

I recognize there is a risk of personal injury associated with any sport. In the event my child needs emergency care and the above person cannot be contacted, a tournament official may give the required consent. I hereby release and waive any claims I might have against the Hamilton County Junior Golf Association and its employees.

Signature of Parent/Guardian (required) _____

Date _____