

**\$130.00**  
**Per Child**  
**Ages 5-15**

All participants must register in advance. Walk-ins cannot be accepted.  
\$10 discount for POA members

**Monday-Thursday**  
**6:00pm - 7:30pm**  
**June 21 - 24**

Do not need to be a Diamondhead resident or golf member to participate

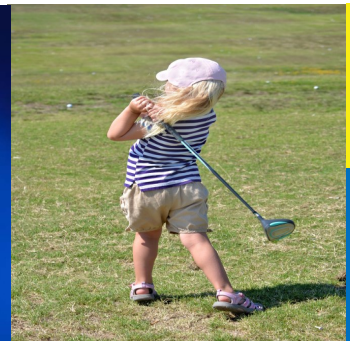
Limited to 1st 24 paid entries.

**228 255-3910**  
golfshop@dhpoa.org  
www.theclubatdiamondhead.com

# 2021 DIAMONDHEAD SUMMER JUNIOR GOLF CLINIC

**Monday-Wednesday: Chipping, Putting, Full Swing, Course Etiquette**

**Thursday: Overview, Drive, Chip & Putt Competition, Pizza Award Banquet**



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**Complete & Return to Golf Shop**

Child \_\_\_\_\_ Age \_\_\_\_\_

Child \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

POA # \_\_\_\_\_

In Emergency Contact \_\_\_\_\_  
Golf Level (circle)  Beginner  Intermediate  Advanced

I hereby grant permission for my son or daughter to be photographed and/or videotaped by Diamondhead Country Club, Golf, Tennis & POA in conjunction with activities associated with Junior Golf Clinic. I hereby grant the POA permission to use my child's likeness in any and all of its publications, including websites, without payment or any other consideration. I expressly and forever discharge the Diamondhead POA and any of its authorized agents any and all claims and demands of any kind whatsoever in relation to, or arising out of, the image. I also don't hold the Diamondhead POA responsible for injury that may occur due to my child's participation in Junior Golf Clinic.

Parent/Guardian Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_