



UNIVERSITY OF ILLINOIS SPRINGFIELD GOLF CAMP

One day Camp will include fundamentals of the game, rules, etiquette, full instruction based on skill level and strength and conditioning tips.

Campers will be instructed on both the range & course. Camp will conclude with a Parent/Junior nine hole scramble. All Campers may have anyone over the age of 16 years old as a partner. If a player does not have a partner a member of the UIS Women's golf team will be available to play. Dinner and awards will follow the scramble.

***Clubs can be provided if needed.

 **JULY 8th & 9th** 

Camp will be held at The Rail Golf Course

BOYS AND GIRLS ~ AGES 4-17~ CAMP FEE \$125

(Includes~ Camp, T-shirt, Golf with cart for junior and parent, Dinner & prizes for everyone.)

CAMP: July 8th Ages 4-11~ 12:00-2:00pm ~ Ages 11-17~ 12:00-4:00pm

SCRAMBLE: All Campers~ Parent /Junior Scramble ~ 2:00pm shotgun (July 9th)

SCRAMBLE ONLY: Player/Parent~ 2:00PM Shotgun (July 9th)

Name: _____ Grade (fall 2011): _____ Age: _____

Address: _____

Phone: _____ Email (parent): _____

Emergency Contact Name: _____ Phone: _____

Please Check Camp Attending:

_____ CAMP: July 8th Ages 4-11 ___ Ages 12-17 _____

SCRAMBLE: Parent/ Junior Scramble (1:15pm registration, 2:00pm shotgun) (July 9th)

_____ Camper will need Clubs _____ Will need a Partner for Scramble _____ Scramble Only (\$75)

Camp Shirt Size (please circle): Adult/ Small~ Adult/ Medium~ Adult/ Large~ Adult/ XL

PARENT/GUARDIAN AUTHORIZATION

Each participant is required to carry his/her own insurance as the camp will not be responsible for accidents, injuries, and illnesses for the participant(s) while at Camp. The participant is in good health and has my permission to participate in Camp. I hereby authorize the Camp administration and staff to act for me in the event of an accident and/or injury, and/or illness requiring emergency and/or Hospitalization as deemed necessary. I shall be notified as soon as possible of any such incident. Therefore, I hereby waive and release the UIS Prairie Stars Golf Program, its affiliated organizations and sponsors, the entire Camp administration and staff and the University of Illinois at Springfield from any and all liabilities for all accidents and/or injuries and/or illnesses while at Camp.

Parent's/Guardian's Name: _____ Signature: _____ Date: _____

****ALL CAMPERS MUST ALSO HAVE A HEALTH & CONSENT FORM ON FILE forms can be found at www.uispraiestars.com**

 **PLEASE MAKE CHECKS PAYABLE TO: UIS WOMEN'S GOLF** 

REGISTRATION DEADLINE IS: June 27,2011

**Please Mail Payment along with Registration, Health & Consent Form to:
University of Illinois at Springfield Attn: Coach Inkel
One University Plaza, MS REC 2004, Springfield, IL**

**QUESTIONS~ COACH NICHOLE INKE~ 217.206.8418, Cell: 217.622.4653
Email: Ninke2@uis.edu**