



# Arkley Golf Club Junior Entry Form

| <b><u>ENTRY FORM</u></b> Please use <b>BLOCK CAPITALS</b> |               |
|---|---------------|
| <b>Name:</b>  | <b>DOB:</b>   |
| <b>Telephone No:</b>                                      | <b>H/Cap:</b> |
| <b>Address:</b>   |               |
| <b>Parent/Guardian Email:</b>                             |               |
| <b>* CDH No:</b>  |               |
| <b>Home Club:</b>   |               |
| <b>Special dietary requirement:</b>                       |               |

\* This must be provided

| <b><u>HEALTH &amp; SAFETY INFORMATION AND CONSENT FORM</u></b>  |
|---|
| <b>Name of Parent or Guardian:</b>  |
| <b>Emergency Telephone No:</b>  |
| <b>List any allergies:</b>  |
| <b>List any medical conditions:</b>   |
| <b>Are you taking any medication?</b>   |
| <b>Doctor's Name:</b>   |
| <b>Doctor's Tel No:</b>   |
| <b>Photography Permission:</b> I permit photographs of my son/daughter to be taken for coaching and promotional purposes by Arkley Golf Club and for publication in the relevant press. |

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| <b>Signature of Parent/Guardian:</b> |
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