



# 2017 Summer Youth Golf Camp

Monday, July 17 - Tuesday, July 18

Adams Municipal Golf Club • 5801 Tuxedo Blvd, Bartlesville, OK

9 a.m. - 11 a.m.

Pre-Registration is required • No Walk-Ups • Deadline for Registration is July 15

*The camp, in conjunction with the professional golf staff of Adams Municipal Golf Course,, will be coordinated by Leslie Core-Drevecky (Osage), Certified PGA Head Golf Professional at Murphy Creek Golf Course in Aurora, CO. Leslie and the staff and instructors from Adams Munifical are motivated to teach each participant whether it be a first-time golfer or an advanced participant in the game of golf. Participants will be divided by age groups and skill levels. Golf clubs are available for use at the camp for those who do not have their own clubs if requested. Camp size is limited. Registrations accepted on an a first-come, first-served basis. Osage members will receive registration preference (validation of Osage membership required). Participants must be in grades 3 through 12 (as of fall 2017). Boys and girls welcome. No transportation to this camp is provided by the Osage Nation Foundation.*

## INSTRUCTIONS:

Complete application and Sign. If applicable, attach copy of Osage Membership Card

Fax to (817) 796-1816, mail to Osage Foundation, P.O. Box 92777, Southlake, TX 76092 or email to:

bwebb@osagefoundation.org. Questions, e-mail or please call 405-415-0383

Participant's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth: \_\_\_\_\_ School Grade as of June 27 \_\_\_\_\_ Male Female

Parent Name \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Circle Participant's T-Shirt Size: Youth S M L Adult S M L XL 2XL 3XL Osage Member? Y N

Circle one related to golfing: Left-Handed Right-Handed Will you need clubs provided? Y N

Emergency Contact Person and Phone \_\_\_\_\_

Any relevant medical conditions \_\_\_\_\_

CONSENT: I authorize a representative of the Osage Nation Foundation and/or camp staff to seek medical treatment for my child if I am not present while my child is participating in this camp. In consideration of the sponsors and facility owner accepting this application, I hereby release and waive all rights to any claim for damages and/or injury my child may suffer while participating in this camp. I understand and agree that medical or other services rendered to my child by the camp sponsors/facility owner is not an admission of liability or continued services. I also grant permission for any photos or other likenesses of my child, obtained as a result of his/her participation in this camp, to be used by Osage Nation Foundation and/or its camp partners to promote its activities.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_