



Camper Name: _____

Buffalo Trace Kids Camp Registration

Minor Participant

First _____ Last _____ Gender: Male ☐ Female ☐
Street Address _____ City _____ State _____ Zip code _____
Child's Home Phone _____ Age of Participant _____
School Name _____ Incoming Grade 6th ☐ 7th ☐ 8th ☐ Birth date ____ / ____ / ____

Parent/Guardian - Contact Information

First _____ Last _____
City _____ State ____ Zip Code _____ Home/Cell Phone _____
E-mail _____

Emergency Contact Information – Alternate Pickup/Release

Emergency Contact #1

First Name _____ Last Name _____
Home/Cell Phone _____ Relation to child _____

Emergency Contact #2

First Name _____ Last Name _____
Home/Cell Phone _____ Relation to child _____

Medical Information

Any Allergies:

Deposit / Payment:

\$70 camp registration fee is due at the time of camp registration and **MUST** be submitted **no later than Tuesday, July 1st**
Camp Fee payable by **check**, payable to Buffalo Trace Golf Course.

Payment with registration may be hand delivered or mailed to: Buffalo Trace Golf Course
1728 Jackson St.
Jasper, IN 47546

Camp Dates:

7/7, 7/10, 7/11 - 8:00 AM – 9:30AM **at the Driving Range:** 2481 N Mill St, Jasper, IN 47546
7/16, 7/17, 7/18 - 1:00 PM – 3:00PM **at Buffalo Trace Golf Course:** 1728 Jackson St, Jasper, IN 47546

Additional Questions:

Height _____

Will this Minor Participant need to borrow clubs? Yes ☐ No ☐ Left-handed? Yes ☐ No ☐

How many years of experience does your child have playing golf? _____



WAIVER AND RELEASE OF LIABILITY

In consideration for participation by the above-named child (“Minor Participant”) in the City of Jasper Parks and Recreation Department (“City”), Buffalo Trace Golf Camp and all associated activities (the “Camp”), I, the undersigned parent or legal guardian, acknowledge and agree as follows:

1. The Minor Participant is voluntarily participating in Buffalo Trace Golf Camp hosted by the City of Jasper.
2. I understand that participation in the Camp may involve inherent risks, including but not limited to physical activity, outdoor excursions, use of tools or equipment, transportation, exposure to weather conditions, and interaction with other participants. I further understand that there are dangers and risks to which me or my minor child may be exposed by participating in the Camp. I recognize that the Camp may test my or my child’s physical and psychological limits due to personal reasons and/or environmental causes (weather, allergens, terrain, traffic, etc.). Personal dangers or risks include but are not limited to physical and/or psychological injuries or conditions including, without limitation, muscle or ligament damage, lacerations, abrasions, contusions and fractures, heart attack, as well as other injuries or conditions up to and including serious injury or impairment to the Minor Participant’s, general health and wellbeing or loss of life. I voluntarily assume all such risks on behalf of the Minor Participant. The Minor Participant is participating at my (his/her) own risk.
3. I understand that this is a legally binding release made by me to the City. I hereby release, waive, discharge, and covenant not to sue the City, its officers, its boards, directors, employees, volunteers, agents, contractors, and affiliates (collectively, the “Released Parties”) from any and all liability, claims, demands, actions, or causes of action arising out of or related to any loss, damage, injury, or illness (including death) that may be sustained by the Minor Participant while participating in the Camp. I understand that the City does not require me or my child to participate in these activities, but I/we want to do so, despite the possible dangers and risks and despite this Release. I hereby, for myself and the Minor Participant, our administrators and heirs and assigns, voluntarily agree to indemnify and hold harmless the City of Jasper, its employees, staff, golf instructors, elected and appointed officials, boards, and agents in any claim, damages, expenses or actions, including attorney fees assessed or brought against them because of my acts or omissions or the acts or omissions of my minor child.
4. In the event of any emergency, I authorize the Camp and its representatives to seek medical treatment for the Minor Participant as deemed necessary. I agree to be financially responsible for any such medical treatment.
5. I understand that the Minor Participant is expected to behave appropriately and follow all camp rules and instructions from staff. I acknowledge that failure to do so may result in the early dismissal from the Camp without refund. Minor Participant shall obey course rules and directions presented by staff and golf instructors, and I understand the risks associated with golf classes and use of the driving range and golf course. I agree to assume any and all risks, whether known or unknown.
6. I certify that I am the parent or legal guardian of the above-named minor. By signing below, I acknowledge that I have read this “Waiver and Release of Liability” and completely understand and agree to its contents.

Signature: _____ Date: _____

Release of Minors (if under 18) Parent/Guardian

Signature: _____ Date: _____