



Cedars Kids Club



Have fun while learning the basic skills, techniques and rules of golf.
Beginners and Advanced Players ages 5-15

Session 1: July 9 to August 2
Session 2: August 6 to August 30

Ages 10 & Under:

9AM-12PM Monday &
Wednesday. 4PM-6PM
Thursday.

\$570 for 4 week session.
Includes group instruction,
on-course play, weekly
prizes, pizza lunch, welcome
gift and 10 Round Junior
Pass.

Ages 11 to 15:

1PM-4PM Monday,
Wednesday & Thursday

\$600 for 4 week session
includes 30 minutes of
private 1x1 lessons per week,
group instruction, on-course
play and Full Season Junior
Pass.

10% off when sign up for both Sessions!

**Add \$100 per Session for additional hour of instruction between
12 & 1PM on Mondays & Wednesdays**

**Register in person, via phone 631.734.6363 or
ken@cedarsgolfclub.com**

Weekly Rates Available if Space Allows



Ron Tauriello returns to Cedars as Lead Instructor for the 2018 Junior Camps. Over the last 16 years, Ron has worked as a teacher, golf instructor, and sports coach. He currently teaches Chemistry in the Bethpage Union Free School District where he also coaches the junior varsity baseball team. Prior to his full-time commitment to teaching, Ron worked as an assistant golf professional at Spring Lake Golf Club and Laurel Links Country Club, and he has continued teaching and assisting players of all ages and abilities during summers and weekends. Ron has a BS in Biology from St. Joseph's College and a Masters degree in Liberal Arts from Stony Brook University. He is a Certified US Kids Golf Instructor and is very excited to bring his experience and passion for golf, education, and youth sports to Cedars.

Cedars Golf Camps incorporate the mission of the U.S. Kids Golf Program which emphasizes fun and encourages interaction with family and friends while learning the lifelong game of golf. Golf Instruction will focus on all areas of the game, including putting, chipping, full swing, etiquette and rules. Each week will include on-course competition as well as group and individual instruction.

Cedars Kids Club

REGISTRATION FORM

Child Name: _____ Age: _____ Gender: _____

Address: _____ Parent Phone Number: _____

City: _____ Zip Code: _____ Parent email: _____

Right Handed: _____ Left Handed: _____ Shirt Size: Youth S, M or L Adult S, M or L

SESSION I SESSION II SESSION I & SESSION II
(July 9 – August 2) _____ (August 6– August 30) _____ 10% OFF _____

Add an additional hour of instruction on Mondays & Wednesdays between 12PM & 1PM for \$100. All age groups may register for the additional hour:

Yes _____ No _____

Ages 10 & Under - Add 2017 Full Season Junior Membership Pass for additional \$75. Includes unlimited golf at all times except during League Play (Tuesdays & Fridays 7AM to 2PM)

Yes _____ No _____

We recommend each child bring at least one properly fitted golf club and a putter. Rental clubs available on a limited basis at no additional charge. Rental Clubs:

Yes _____ No _____

Custom-fit US Kids Clubs are available for sale. Please indicate if you would like to schedule a complimentary club-fitting. Allow at least two weeks prior to start of camp for custom orders.

Yes _____ No _____

Pizza Lunch Served on Monday & Wednesday at 11:40AM. Please list any allergies or indicate if you do not want lunch served to your child:

Please check if you would like to deposit any money into your child's camp account for snack, beverage or pro shop purchases:

\$10 _____ \$20 _____ \$30 _____

Please E-Mail completed forms to ken@cedarsgolfclub.com or Return to Cedars Golf Club:
305 Cases Lane Ext, Cutchogue, NY, 11935

CEDARS GOLF OPERATIONS LLC

Junior Golfer _____
(Please Print)

Parent or Guardian _____
(Please Print)

The undersigned is the parent/guardian of the Junior Golfer named above and hereby acknowledges that the execution of this Agreement is a condition to the participation of the Junior Golfer in the Cedars Golf Club Junior Golf Program (hereinafter "Program") operated by Cedars Golf Operations, LLC ("CEDARS"). The undersigned accepts that the sport of Golf and the conduct of the Program entail and are subject to certain inherent risks, and, on behalf of the Junior Golfer, accepts all risks of participation in the Program. Now, therefore, the undersigned hereby agrees as follows:

- 1) The undersigned consents to the participation of the Junior Golfer in the Program.
- 2) The undersigned consents to the participation of the Junior Golfer in all tournaments, clinics, games, recreational activities, lunches, and other events (hereinafter collectively "Events") which are a part of the Program, whether or not specifically named on the registration materials, and acknowledges that said consent is without exception within the limits proscribed within, unless a specific exception is noted herein.
- 3) The undersigned waives any claims against and releases any obligation of CEDARS, and all of their respective owners, employees, agents and all persons acting in any capacity for the conduct of the program in relation to any loss, injury or damage, to the Junior Golfer or to the property of the undersigned or the Junior Golfer to the fullest extent permitted by law.
- 4) The undersigned agrees to reimburse CEDARS and all of their respective members, employees, agents and all persons acting in any capacity for the conduct of the Program for any loss or damage to property, and hold CEDARS harmless from any claim, loss or injury caused by the negligence, or misconduct of, or failure to exercise reasonable care by the Junior Golfer.

Signature of Parent/Guardian _____ Dated _____

PARTICIPANT INFORMATION

Home Address: _____ Date of Birth _____ Male / Female
Home Phone (____) _____ Fax (____) _____ E-mail. _____

| | | |
|----------------|--------|--------|
| | Mother | Father |
| Name | | |
| Work Phone # | | |
| Home Phone # | | |
| Mobile Phone # | | |

Chronic illness, medical conditions, allergies or medication being taken (Please list, or write none)

Medical Authorization

I hereby authorize an instructor from CEDARS, or an adult who bears this document, to authorize emergency treatment for the Junior Golfer named above in the event that a parent or legal guardian cannot be reached at the above telephone numbers at the time of the emergency.

Signature of parent or guardian _____ Date _____

EMERGENCY CONTACTS IF PARENTS CANNOT BE REACHED:

Name _____ Home Phone _____ Work Phone _____ Relationship to Golfer _____

Name _____ Home Phone _____ Work Phone _____ Relationship to Golfer _____

**Cedars Golf Operations LLC
LIABILITY WAIVER AND RISK WARNING
MEDICAL TREATMENT AUTHORIZATION
DAMAGE RESPONSIBILITY AND INDEMNITY
EXPENSE GUARANTY**

In consideration of Cedars Golf Operations LLC (“CEDARS”) accepting the applicant named below (Participant) for its Junior Golf Program (Program), the undersigned parent, custodial parent or guardian of the Participant (Parent) and the Participant, for the undersigned Parent and the Participant and their respective heirs, successors, executors administrators and assigns, hereby acknowledge and agree to the following:

The Participant and Parent acknowledge that participation in the Program is voluntary and that such participation involves the risks of serious injury associated with sporting activities. They acknowledge that they are aware of and fully understand these risks and voluntarily accept responsibility for all such risks. The Participant and Parent hereby covenant and agree to waive, indemnify and hold harmless CEDARS, its officers, directors, employees, volunteers and anyone one assisting in or associated with the Program from any and all liability for any claim, demand, suits or causes of action arising out of or connected in any way with Participant's participation in the Program.

The Participant and Parent hereby authorize CEDARS and anyone associated with the Program to administer first aid and to provide and secure emergency medical treatment, and they acknowledge that providing such treatment shall not be construed as an admission of guilt or liability and does not affect the foregoing waiver.

The Participant agrees to respect CEDARS property and the property of others and be responsible for any loss or damage to CEDARS or others’ property caused by him or her that may occur at any time during their participation in the Program or Events. If such damage or loss to someone else’s property does occur, the Participant and Parent agree to indemnify CEDARS from any liability for such any loss or damage and to make payment directly to the affected party.

The Parent agrees to guarantee any and all expenses incurred by the Participant.

The Participant agrees to obey all program rules as set forth by CEDARS Golf Club and the instructors, to use utmost care in the use of equipment, to not engage in horseplay or other disruptive behavior, to not use foul and/or inappropriate language, to behave in a fair and sportsmanlike manner and be considerate of the feelings and property of others. The Participant acknowledges that failure to abide by the rules may result in suspension or dismissal from the Program.

Participant's Name: _____

Participant’s Signature _____

Parent’s Name: _____

Parent's Signature _____

Date: _____