

SNAG GOLF at Idyl Wyld

For JUNIOR GOLFERS
Ages 5-8 years
Must be 5 yrs of age by June 16, 2020
Starting New At Golf
Easy to Learn and Fun to Play!

Idyl Wyld Golf Course • 35786 Five Mile Road • Livonia MI 48154 • (734) 464-6325 • www.golflivonia.com

LEVEL 1

Golf instructors provide the basic fundamentals of the game with the use of colorful and unique equipment, along with the proper rules and etiquette, in a SAFE and ENJOYABLE environment.



\$54

One session



LEVEL 2

Instructors build on the fundamentals taught in Level 1, going more in depth with rules and etiquette, while adding more advanced training aids to the class.

\$94

For two sessions

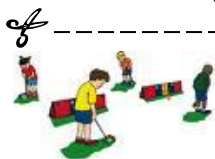


SESSIONS MEET TUESDAYS*, FOR FOUR CONSECUTIVE WEEKS

(*except in Session 3, there will be a Wednesday meeting on August 26)

Session 1 begins June 16th June 16, June 23, June 30 and July 7	Session 2 begins July 14th July 14, July 21, July 28 and August 4	Session 3 begins August 11th Aug 11, Aug 18, Aug 25 and *Wednesday Aug 26
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OPEN REGISTRATION at Fox Creek G.C. (Mon-Thurs 10:00 am-6:00 pm). Programs are available for purchase at www.golflivonia.com/shop/ Register after April 1st, 2020 at Idyl Wyld (Daily 7:00 am-7:00 pm). The golf course is responsible for canceling a play date. There will be NO make-up days for any other missed dates.



2020 SNAG REGISTRATION FORM

Please complete and return with full payment. CHECKS PAYABLE TO TJW, INC.
Programs are available for purchase at <https://www.golflivonia.com/online-store/>



Place an "X" in the preferred session and time slot according to the level of the participant. **SNAG meets once a week on Tuesdays, for four consecutive weeks, (except in Session 3, a Wednesday meeting on August 26)**

Session #1 Begins the week of June 16 June 16, June 23, June 30 and July 7	Session #2 Begins the week of July 14 July 14, July 21, July 28 & August 4	Session #3 Begins the week of August 11 Aug 11, Aug 18, Aug 25 and *Wed Aug 26
<input type="checkbox"/> Level 1 9:00am-9:45am <input type="checkbox"/> Level 1 10:00am-10:45am <input type="checkbox"/> Level 1 11:00am-11:45am	<input type="checkbox"/> Level 1 9:00am-9:45am <input type="checkbox"/> Level 1 10:00am-10:45am <input type="checkbox"/> Level 2 11:00am-11:45am	<input type="checkbox"/> Level 1 9:00am-9:45am <input type="checkbox"/> Level 2 10:00am-10:45am <input type="checkbox"/> Level 2 11:00am-11:45am

Participant's Name _____ Male Age as of _____ Date of Birth _____
 Female 6-16-20 _____

Address _____ City _____ Zip _____

Phone No. () _____ Current School _____

Parent Email Address: _____

Participant/Parent Note: The City of Livonia Golf Division, its officials and representatives, either employed or voluntary, assume no responsibility whatsoever for any injury by the participant in the Golf Division activity. Further, to the best of my ability, I hereby certify that my child is in good health and physically able to participate in this activity. My child and I agree to abide by the rules and regulations of the Golf Division. I also grant permission to use photographs taken of me/my child for departmental advertisement.

PARENT/LEGAL GUARDIAN NAME: _____

SIGNATURE: _____ DATE: _____

EMERGENCY CONTACT NUMBERS: _____

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CHECKS PAYABLE TO: TJW, INC.

FULL PAYMENT due with registration.
Full Refund (less \$5) before 1st week.
NO REFUND once session begins.