



# MIGHTY PEACE GOLF CLUB

## 2026 JUNIOR PROGRAM REGISTRATION

Junior Name: \_\_\_\_\_

Age: \_\_\_\_\_ Approximate number of times has gone golfing: \_\_\_\_\_

Does your child have golf clubs: \_\_\_\_\_ If no, are they left or right handed: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/Cell: \_\_\_\_\_

Home Address: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Allergies/Concerns: \_\_\_\_\_

As described in the Program Outline, the last day entails golfing on the course. Since there are only two instructors, it is helpful to have a couple parent volunteers available to assist the juniors with basic rules and safety while they are golfing.

Will you be available to assist the juniors on the last day? \_\_\_\_\_

\*Parents are also welcome to follow along with their child and see how they have improved. Fees need to be paid at the time of registration.

PAID BY: VISA  MC  CASH  CHEQUE  DEBIT

E-TRANSFER  Send to mightypeacegolf2016@gmail.com

PHOTO WAIVER: DATE PAID: \_\_\_\_\_ Staff: \_\_\_\_\_

The Mighty Peace Golf Club is requesting permission to use images and photos of participants for publicity purposes for the club. These photos and images will be used on our website, emails, brochures, social media and signage.

I give permission for the MPGC to use images and photos for this participant. Yes  No

Parent Signature: \_\_\_\_\_

Mail to: Mighty Peace Golf Club, Box 920, Grimshaw, AB T0H 1W0

Email to: mightypeacegolf2016@gmail.com