Mount Pleasant Parks and Recreation 307 East Monroe Street, Mount Pleasant, Iowa 52641

Youth Golf Camp (Ages 8-14)

Join us at the East Lake Park's Driving Range. Participants will be introduced to the basic fundamentals such as the proper grip, swing, stance, and etiquette. This camp will be taught by the Mount Pleasant High School Girls Golf Coach, Haley McElhinney.

Registration: April 21-June 20

July 14-17 **Camp Dates:**

Camp Time: 9:00-9:45 AM (ages 8-10)

10:00-10:45 AM (ages 11-14)

East Lake Park, Driving Range **Location:**

\$20 Residents \$25 Non-residents Fee:

Program size limited to 10 participants

Detach the bottom portion and return to the Parks & Recreation Department 307 E Monroe, Mount Pleasant, IA 52641 Phone: 319-385-1475 Email: mpparkandrec@gmail.com

25	Name:			Address:		
20				City/State/Zip:	_	
9	Age:	Grade:	Gender:	Mt. Pleasant City Resident:	Yes	No
Golf Car	Has own Clubs (please circle): Yes No Hold Harmless Agreement Photo Policy of the Parks and Recreation Department on occasion, may photograph participants in programs or events. These photos may be used in publication, brochures, flyers, or video productions. With signing your name, you are allowing that permission. If you are against our policy please let the department know. Whereas the City of Mt. Pleasant, Iowa, acting through the Mt. Pleasant Parks & Recreation Department, is conducting recreational activities for the benefit of the Mt. Pleasant, Iowa area on the above program dates for the activity. We the undersigned, hereinafter referred to as the participants, and as said participant is under the age of 18, we the parents also do hereby covenant and agree to save the City of Mt. Pleasant, Iowa and its employees free harmless from any and all claims, demands, damages causes of action or suits at law or in equity and attorney's fees related thereto, at whatsoever kind or nature that may arise in the future, or at any time as a result of any damages done by said participants to any person, firm or corporation as result of said participants activi-					

care, hospitalization, and personal liability claims brought by

or against each individual.

Print your name of the Parent or Guardian of the Participant Date Parent or Guardian's Email: