

# Downtown Optimist Club of Meridian's 2024 Junior Golf Program

Participant's Name: \_\_\_\_\_

Parent or Guardian's Name: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ (MUST INCLUDE)

Age: \_\_\_\_ Date of Birth: \_\_\_\_\_ Male: \_\_\_\_ or Female: \_\_\_\_

How did you hear about sign-ups? \_\_ Family/Friends \_\_ Flyer \_\_ Facebook \_\_ Website

**DOWNTOWN OPTIMIST CLUB RELEASE FROM LIABILITY**

I hereby agree to hold the *Downtown Optimist Club and its members* harmless from any liability that may arise from incidents, accidents, or sicknesses involving my child while in the care of the *Downtown Optimist Club* or during the course of the 2024 Junior Golf Program. I am fully aware and fully understand the risks that are present during this time, and I take full responsibility of any incident, accident, or sickness involving my child.

Further, the *Downtown Optimist Club* has my permission to use my child's/children's photograph publically to promote the *Downtown Optimist Club* and their youth programs. I understand that the images may be used in print publications, online publications, presentations, websites and/or social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Name of Participant: \_\_\_\_\_

Name of Parent/Guardian (Please Print): \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_