



## 2022 Intermediate Junior Program

*Choose Session(s):*

*Summer 1 – June 13-14, June 20-21*

*Summer 2 – July 11-12, July 18-19*

**Focus:** My child has played before or participated in junior programs previously but would like to improve his or her game. (Intermediate: Ages 10-17)

Bittersweet is committed to teaching youth the fundamentals of the game, while also providing a fond summer memory in an enjoyable and safe environment. The following classes are for ages 10-17.

### Each Session comprises four hour-long clinics.

CLINIC #	TIME	CLUBS TO BRING	BRIEF DESCRIPTION
1	9:45-10:45am	All Clubs	Full Swing
2	9:45-10:45am	Putter, Wedge	Putting, Chipping
3	9:45-10:45am	Sand Wedge	Bunker Play
4	9:45-10:45am	All Clubs	Challenge Day

\*We are asking juniors to bring their own clubs. A limited number of clubs will be available and provided at no additional charge if needed; please let us know in advance.

\*Class minimum 4, maximum 8.

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**Fee for each Session ---\$250** All classes will be taught by teaching professional Sean Joyce.

**“Intermediate Juniors” are 10-17 years old.**

*Enrollment is limited. No refunds will be given within five days of each Session's start date.*

Registration form: Check \_\_\_\_\_ or C.C # \_\_\_\_\_

EXP. \_\_\_\_\_

Student Name: \_\_\_\_\_

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

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

Parent Phone: \_\_\_\_\_

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

Clubs Needed? Y/N \_\_\_\_\_ RH or LH (circle)

## **Liability Waiver For Participant**

### **Personal Injury Release**

As a parent with a child who is a participant in the Bittersweet Golf Club instructional programs, I recognize and acknowledge certain risks of physical injury exist with this activity. I agree to assume full risk of any injuries, including death, loss or damages, that my child(ren) may sustain as a result of participating in any and all activities connected with or associated with this program.

I do hereby fully release and discharge Bittersweet Golf Club, their officers, agents, servants and employees, and owners/ managers of the premises, from any claims from injuries, death, damages or loss that may accrue on account of my child's participation in this program.

I have fully read and understand the above.

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

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

Authorized: \_\_\_\_\_

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

847-855-9031

[www.bittersweetgolf.com](http://www.bittersweetgolf.com)

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