

Invoice Number: _____

Please submit this form to any of our centers or scan and email to: $\underline{sg.training@kindergolf.com}$

For more information, call our HQ at +65 6441 3383 or SMS +65 9338 8027

	where	learnin	g golf is fun									
			KINDERGOLF GO	OLF	CAMP –	REGISTRAT	ION FORM					
Participant's Name:					D.O.B:					Gender: Male / Female		
Addres	SS:				Postal Code:							
Parent	's Nar	ne: _			Relationship:							
Home Number: Mobile Number:					Email Address:							
CAMP DATES- DECEMBER 2015												
Date	D	ay	Venue	Le	evel		Duration	Time	KG	Public	✓	
2 nd De	c V	Ved	National Service Resort & Country Club	Int	termediate	to Advance	Half Day	4рт-7рт	\$120	\$150		
7 th De	c M	1on	National Service Resort & Country Club	Be	eginner to I	ntermediate	Full Day	9am-5pm	\$150 \$180			
9 th De	c V	Ved	National Service Resort & Country Club	Int	termediate	to Advance	Half Day	4рт-7рт	\$120	\$150		
16 th D	ec V	Ved	Orchid Country Club	Beginner to Intermediate			Full Day	9am-5pm	\$150	\$180		
16 th D	ec W	Ved	National Service Resort & Country Club	Intermediate to Advance			Half Day	4рт-7рт	\$120	\$150		
17 th D	ec T	'nυ	Orchid Country Club	Be	eginner to I	ntermediate	Full Day	9am-5pm	\$150	\$180		
Camps at National Service Resort & Country Club are inclusive of Green Fees												
FOR FULL DAY CAMPS, PLEASE CHOOSE YOUR DESIRED FOOD BELOW:												
			Food		√	Drink				✓		
			2 pcs Chicken Meal			Milo						
			Fish Fillet Meal	Coke								
- Mineral Water												
Please indicate if your child has special requirements (e.g. allergies, medical needs, etc):												
	0.6	1:4:										
Terms			ONS: g your child for or permitting your child to participate in	n Vinc	dorColf Colf E	voross Camp, vou	warrant us that v	rour child is physic	ally canal	hla of partici	inatina	
1)	in that	Cam	o and that he/she is not subject to any condition (late	nt or	otherwise) inc	cluding without lim	itation any medi	cal, physical, psy	chologica	or other co	ndition	
which may put her or any other child at risk of injury or other adverse consequences. You make this warranty having full understanding of all the activities which your child will be participating in and the conditions under which these activities will take place. 2) You further warrant that the information you have provided to us regarding your child, including the presence of any medical, physical, psychological and other												
condition, including without limitation any allergies, previous injuries and asthma, are complete and accurate. We rely on this information when designing and carrying out the Camp your child is participating in, including safety measures.												
3) Should you have concern or doubt as to whether your child suffers from any condition (including any latent condition) as aforesaid, you should seek qualified medical advice prior to registering your child at KinderGolf.												
5)												
6) 7)	I am a	ware t	that the KinderGolf Terms & Conditions will apply for thi The School reserves the right in its absolute discretion to	is pro	gram.	-		s usage for promic	nioriai pur	poses.		
		b.	The School reserves the right in its absolute discretion in The School reserves the right to cancel or change an have the option of attending another similar program	y pro	gramme sche	edule or session in	the event of insu					
	(fee. These are your exclusive remedies and the extent No refund of fees except for the reason stated on 7.b.	of th			33 300JCC1 10 QV	allability) of feeci	villig a loii	reiona or yo	OI .	
	 c. No refund of fees except for the reason stated on 7.b. d. All programme fees are payable in full by the Golf Camp's closing date. All payments shall be made in cash, credit card or by cheque made payable to "KinderGolf Pte Ltd". 											
							-	Parent's sign	ature/Da	ete		
For Of	ficial (Use (Only:									
Date received: _			Rec	Received by:				(staff's name and address)				

_____ Amount: ______ Center: _____