



Adam C. Davidson
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FREE PGA CLINIC

- Sessions:** 12/12/2009
12/ 19/2009
01/09/2010
01/16/2010
01/23/2010
- Time:** 3:00 p.m. – 4:00 p.m.
- Location:** 2701 Ridgeview Dr. / Plano, TX 75025
- Contact:** Complete the Form below, drop it off at
Ridgeview Ranch Golf Club, Attention Bruce
Sims
- Instructor:** **Bruce Sims**, Class A Master Teaching Professional
bsimspro@hotmail.com, **214-475-5168**
Visit: <http://BruceSims.com>
- Deadline:** **12/05/2009**
The clinic is limited to only 30 junior golfers per clinic. If we get
40+ responses we will offer another one on Tuesdays from 4:30
p.m. – 5:30 p.m.)



PGA/USGA Kids on Course After School Golf Program

Name: _____ Age: _____ Boy: _____ Girl: _____ Student ID # _____

Height: _____ Right Handed: _____ Left Handed: _____ Played Golf Before?: Yes: _____ No: _____

Parent's Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Parent / Guardian Permission

This program requires physical activity. Please list any health conditions / allergies that we should be aware of: _____

I give permission for my son and/or daughter to participate in the PGA/USGA Kids on Course After School Golf Program . I agree to and understand although precautions will be taken to insure the safety of my child, an injury might occur during the program and is not the responsibility of the USGA, PGA, Northern Texas PGA, Northern Texas PGA Junior Golf Foundation, Charles Rice Learning Center, the PGA professional or the instructors.

Parent / Guardian's Signature: _____ Date: _____

Best Phone(s) to Call in Case of an Emergency: 1) _____ 2) _____