

The Idaho Falls Junior Golf Association Registration Form

Parent/Guardian Names _____
Daytime Contact Phone Number _____ Email Address _____ @ _____
Mailing Address _____
Street _____ City _____ Zip _____

(Please reference Junior Book for appropriate Fees & Information)

Junior Golfer #1 _____ Birth Date _____ Sex: Male / Female
Season golf Pass Number (if she/he has a pass) _____ Junior Association Fee Paid _____

Junior Golfer #2 _____ Birth Date _____ Sex: Male / Female
Season golf Pass Number (if she/he has a pass) _____ Junior Association Fee Paid _____

Junior Golfer #3 _____ Birth Date _____ Sex: Male / Female
Season golf Pass Number (if she/he has a pass) _____ Junior Association Fee Paid _____

Junior Golfer #4 _____ Birth Date _____ Sex: Male / Female
Season golf Pass Number (if she/he has a pass) _____ Junior Association Fee Paid _____

Junior Golfer #5 _____ Birth Date _____ Sex: Male / Female
Season golf Pass Number (if she/he has a pass) _____ Junior Association Fee Paid _____

Total Fees Paid for all juniors listed _____ → **\$** _____

Mail this form with cash or check to: Pinecrest Golf Course / 701 East Elva / Idaho Falls, ID 83401 Attn: Junior Golf