

**YMG /TIGER SESSIONS AT
Mill Green GC / South Herts GC / Kingsway Golf Centre**

PARENTAL CONTACT & CONSENT FORM

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|---|---|
| Childs Name: | Date of Birth: |
| Home Address: | Parent / Guardian Name: |
| Alternative Contact Details: (Name / Tel) | Contact Details: Home Tel: Work Tel: Mobile: |
| Doctors Name: | Surgery Tel: |
| Surgery Address: | Allergies / Medical Conditions |
| Consents: | Parent / Guardian Signature |
| I consent to my son / daughter receiving golf tuition from PGA registered Professionals each of whom is police checked. | |
| I consent to photographs of my child / children being taken and used in press reports, Tiger Club junior website (password protected) & promotional material | |
| I understand that I may not leave the premises if my child is aged 7 years or under during the Tiger / YMG session. | |
| I agree to drive my child to any Tiger / YMG away golfing event or to make my own arrangements / agreements with any other drivers going. | |
| In the event of an emergency I consent to my son / daughter receiving essential medical treatment as prescribed by a qualified medical practitioner. | |
| I have / have not golfing Insurance in place for the above named child. | |
| RECOMMENDATIONS | |
| <i>We highly recommend that adequate golfing insurance is in place for your child / children to cover Personal Liability & Personal Accident & Loss of Equipment whilst participating in any Tiger golfing event during their membership of The Tiger Club.</i> | |

