



YMJ JUNIOR GOLF PROGRAMME

REGISTRATION FORM

PLEASE CIRCLE AS APPLICABLE CADET BRONZE SILVER GOLD MASTERS

Name:

course start date:

Address:

Post Code: Tel. No.:

E-mail:

Emergency parent/guardian contact tel. no.:

Please remember to let your professional know your new details if you move house after you have started Cadets and before you complete the Masters level.

Date of Birth: Sex: **Male** **Female**

How did you hear about this golf programme?:

Payment options:	Cash	Cheque	Credit / Debit card
Card No:	Exp Date	Sec No (last 3 digits on back of card)	
Signature of card holder			

Parent or Guardian Signature: _____

In applying and being accepted for participation on the Young Masters Golf Limited (YMJ) junior golf programme you are agreeing that your name, participation and results can be posted on the YMJ website and that YMJ can send you information on its products and those of its programme partners. YMJ will not provide the personal details you have supplied to them to any other party without your prior consent.