



The Hills Country Club

Junior Player Development Program



Player Information Sheet

PLAYER INFORMATION:

Player's Name: _____ M/F _____

Player's Birthdate: _____ Age: _____

Address: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

School Attending: _____ Grade: _____

Shirt Size: Men's Size: XL L M S XS Ladies Size: XL L M S XS
 Youth Size: XL L M S **(circle one)**

PARENT INFORMATION:

Father's Name: _____ Mother's Name: _____

Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____

Email Address: _____ Email Address: _____

Facility Name: _____ Coach Name: _____

Liability Release

I, the undersigned, do hereby release The Hills Country Club, Lakeway Golf Club and CLUBCORP, its directors, staff, officers, volunteers, as well as an other agents, and officials from any and all liability, accidents, or injuries sustained by the applicant or parent/guardian in connection with The Hills of Lakeway Junior Player Development Program

Signature of Parent/Guardian)

(Date)

Please print name of Parent/ Guardian)