

Snoqualmie Falls Junior Golf Application

Name of Junior _____ Birth Date _____
Parent/Guardian _____ Phone _____
Address _____ City _____
Email Address _____
Emergency Contact _____ Emergency Phone _____
Doctor's Name _____ Doctor's Phone _____
Any Allergies and Medications _____

Liability and Release Form

1. The undersigned participant hereby releases the following parties from any or all liability, claims, demands, actions, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the undersigned participant, occurring while the undersigned participant is attending or participating in any golf practice or outing.
 - a. Snoqualmie Falls Golf Course and owner
 - b. Jeff Groshell and any employees of Snoqualmie Falls Golf Course
 - c. Any volunteers during the event

This release shall be binding upon distributes, heirs, next of kin, executors, administrators, and personal representatives of the undersigned participant.

2. Acknowledgments and representatives of the undersigned. In signing the foregoing release, the undersigned participant hereby acknowledges and represents that he/she has read the foregoing release, understands it, and signs it voluntarily.

Signature of Parent/Guardian

Today's Date