



2018 October Saturday Series

Registration Form

Child's Name(s): _____ Child's Age(s) _____, _____

Golf Experience Level: (circle one) Beginner Intermediate Advanced

Need Clubs (circle one): Yes No

Parent's Name: _____ Phone #: _____

Email: _____

Session Registering For:

Saturday Series: 10/6, 10/13, 10/20, 10/27: Please indicate # of days attending: _____

Cost is \$25 per week'.

Method of Payment: Check #: _____

Credit Card Type: _____ #: _____

Exp/CCV: _____ (we accept Visa, MC & Discover)

Cash:

Please complete and return to: Bella Rosa Golf Course, 5830 Bella Rosa Pkway, Frederick, CO 80504.

Any questions, please contact Tim Schwartz at 303-678-2940 or tschwartz@frederickco.gov