

# 2025 JUNIOR GOLF REGISTRATION

Please Print Clearly

Member's Name \_\_\_\_\_  
Golf Member                      Social Member                      {Circle one}

E-mail Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Registration form must be accompanied by a check, payable to:

CCC Junior Golf

Mail to:

Conestoga Country Club  
Care of Junior Golf Committee / Robert Leeman  
1950 Stone Mill Road  
Lancaster, PA 17603

## **FEE SCHEDULE**

*Golf Members                      \$200.00 per child*

*Social Members                      \$250.00 per child*

Age as of 6/1/24

Child's Name

Age

Level

_____	Boy	Girl	_____	_____
_____	Boy	Girl	_____	_____
_____	Boy	Girl	_____	_____
_____	Boy	Girl	_____	_____

In case of emergency during Jr. Golf Program, if neither parent nor guardian can be reached please contact:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Being On Time and adhering to the Dress Code are the **MOST IMPORTANT** things we ask of all parents. Children arriving late for Clinics or Play Date Tee Times might not be able to participate that day.

I am aware of all Junior policies and agree to abide by all the clubs' policies and procedures as they pertain to Junior Golf.

Parents Signature: \_\_\_\_\_

-----  
Please do not write below this line.

Pd \$ \_\_\_\_\_

Check # \_\_\_\_\_