



The First Tee of San Juan County, NM Participant Permission Form

Today's Date: _____

Participation: New Return

Members Since: ____ / ____ / 20__

Youth Information

Name: _____ Gender: Male Female

Address: _____ City: _____ State: _____ Zip Code: _____

Ethnicity: African-American Asian-American Caucasian Hispanic

Native-American Pacific Islander Other Don't wish to respond

Birth Date: ____ / ____ / ____ School: _____ Grade Level: _____

Health Information: _____ Disability Information: _____

Parent/Legal Guardian: _____ Relationship: _____

E-mail Address: _____ Phone: (day) _____ (eve) _____

Family Income: Below \$10,000 \$10,000-\$24,999 \$25,000-\$49,999 \$50,000-\$74,999

\$75,000-\$100,000 Above \$100,000 Do not wish to respond

Participation Consent Form completed by: Mother Father Legal Guardian

Health Information

Emergency Contact: _____ Relationship: _____
(if parent/guardian cannot be reached)

Work Place: _____ Phone: _____

In the event that I cannot be reached in an emergency, I agree to accept any and all determinations of need for medical assistance and /or administration of medical attention deemed necessary by The First Tee of San Juan County, NM representatives. I hereby give permission to the medical personnel selected by The First Tee of San Juan County, NM representatives to secure any and all medical, hospitalization, dental, and/or surgical treatment. In event that such medical attention is needed from a health care provider, all costs shall be the responsibility of the parent of guardian.

Parent/Guardian Initials: _____

Equipment

I understand that any golf equipment received for use is the property of The First Tee of San Juan County, NM, and may be returned at the discretion of The First Tee of San Juan County, NM upon the termination of the participant's involvement in the program.

Parent/Guardian Initials: _____

Media Release

I hereby give The First Tee of San Juan County, NM, Headquarters Office and participating agencies permission to use film, video tape, and/or photographs of the above mentioned minor for lawful promotional or informational purposes.

Parent/Guardian Initials: _____

I, the parent/legal guardian of the above name youth, give approval for participation in The First Tee sponsored activities. I assume all risks of injury whatsoever and agree to hold harmless The First Tee of San Juan County, NM and Headquarters Office from claim(s) of any nature arising from any activity, including transportation, connected with The First Tee facility or program. This hold harmless agreement includes, but is not limited to, any claim due to injury proximately resulting from negligence of The First Tee of San Juan County, NM or Headquarters Office, its employees, agents, LPGA and PGA Professionals, participating agencies, and volunteers. I consent to The First Tee of San Juan County, NM and Headquarters Office communicating information regarding my child's participation via the Internet.

Parent/Guardian Signature: _____ **Date:** _____

Please Print Name: _____

Witness Signature: _____ **Date:** _____

Please Print Name: _____