



**PLAYER PROFILE** *return completed forms to 1757 Golf Club*

Date Enrollment Completed Online: \_\_\_\_\_

Player *(Full Name)*: \_\_\_\_\_

Nickname: \_\_\_\_\_

Player Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_

Parent or Guardian *(Full Name)*: \_\_\_\_\_

Parent or Guardian Contact Tel: \_\_\_\_\_

Parent or Guardian Email: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Previous Junior League Experience *(Any)*: ☐ YES ☐ NO

Golf Lesson Experience: \_\_\_\_\_

Tournament / Competitive Experience: \_\_\_\_\_

Special Notes *(Allergies, Special Needs, etc)*: \_\_\_\_\_

Emergency Contact *(If Different from Parent)*: \_\_\_\_\_

Emergency Contact Tel: \_\_\_\_\_