



RELEASE OF LIABILITY

I, _____ release the San Diego Junior Golf Foundation of and liability regarding my son/daughter _____; from any accident or injury that may occur on the premises of the San Diego Junior Golf Foundation or during any event.

In case of emergency, please contact:

Name: _____ Phone# _____

Name: _____ Phone# _____

Doctor's Name: _____ Phone# _____

Hospital to be taken to in case of emergency: _____

Does your child have any medical condition that we should know about? Yes _____ No _____

If answer is yes, please explain: _____

Questions:

Signature: _____ Date: _____

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