



# 2024 JUNIOR GOLF CAMP JUNE 17 – JUNE 20

REGISTRATION DEADLINE JUNE 7TH

Check payable and Registration forms sent to: Pinetop Lakes Golf Club, P.O. Box 1779, Pinetop, AZ 85935  
REGISTRATIONS MAY ALSO BE EMAILED AND CREDIT CARD NUMBER PHONED INTO PRO SHOP

PINETOP LAKES GOLF & COUNTRY CLUB, 4643 BUCK SPRINGS ROAD, PINETOP, AZ 85935: 928-369-4531  
[WWW.PINETOPLAKESGOLF.COM](http://WWW.PINETOPLAKESGOLF.COM)

## CLINIC TIMES

MONDAY, TUESDAY AND WEDNESDAY

9:00 A.M. TO 10:00 A.M. AGES 6-8

10:00 A.M. TO 11:00 A.M. AGES 9-10

11:00 A.M. TO 12:00 NOON AGES 11-12

12:00 NOON TO 1:00 P.M. AGES 13-17

\* Clinic time subject to change based upon enrollment numbers



## FAMILY NIGHT

WEDNESDAY - Music In The Pines after the putting contest.  
Begins at 4:00 p.m. - Concert is FREE, food and drinks are available for purchase.

PUTTING CONTEST at 3:00pm

## TOURNAMENT

THURSDAY

4 person Team Scramble, Shotgun Start @ 8:30 a.m. Lunch and Awards to follow. Lunch included for juniors. Non-participant cost is \$13 per person. Please confirm at Monday Registration if you want to eat.

RULES: All juniors are guests of Pinetop Lakes Golf Club and must uphold the rules of the club.

PROGRAM GOALS: To introduce juniors to the game of golf with emphasis on etiquette, rules, swing fundamentals, safety, and course management.

GOLF CLUBS: We can provide clubs for those needing them. If you have outgrown your clubs, please return them to us. Donations are greatly appreciated!

CONTACTS: Dennis Palmer: [dennis@pinetoplakesgolf.com](mailto:dennis@pinetoplakesgolf.com), Josh Silliman: [info@pinetoplakesgolf.com](mailto:info@pinetoplakesgolf.com), Sally Cardwell: [cardwell.sally@yahoo.com](mailto:cardwell.sally@yahoo.com)

NAME \_\_\_\_\_ NEED CLUBS? (R/L) \_\_\_\_\_ AGE \_\_\_\_\_ T-SHIRT SIZE \_\_\_\_\_ ABILITY LEVEL(circle one)---NEVER----LITTLE----SOME

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I hereby agree to hold Pinetop Lakes Golf Club, its employees, facilities, and volunteers harmless during the Junior Golf Program. I also agree that the above named junior(s) will follow the rules set forth by the Junior Golf Program Directors or be subject to dismissal from the program with NO REFUND!

PARENT/GUARDIAN'S SIGNATURE \_\_\_\_\_ DATED \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE# \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_