

*Junior Week Registration Form - 2017*

Name: \_\_\_\_\_ Member \_\_\_\_\_  
\_\_\_\_\_ Associate Member \_\_\_\_\_

**Guests: List Children's Names and Ages:**

	Age
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

**Members: List Children's Names and Ages:**

	Age
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

**List Golf Cart Types and Numbers:**

	Assigned Number
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

I have read and agree to abide by the Junior Week Rules. I hereby accept full responsibility for any and all actions of the individuals listed above. I understand that according to the By-Laws of the Little River Club, I can be held financially responsible for any damage that results from the actions of any individual(s) attending Junior Week under my membership.

**Signature of responsible party:** \_\_\_\_\_