

Unit P-01, 9625 Pike Lake Road R.R. #3, Clifford, Ontario NOG 1M0 HST# 104199146

PRO SHOP

519-338-3010

1-800-265-2551 <u>proshop@pikelake.com</u> www.pikelake.com

Junior Golfer Informatio	n:				
Name		E-mail			
Address					_
Town/City		Date of Birth (Month/Day/Year)			
Postal Code	al Code Provinc				
Phone	Cell Phone		Gender Identity:		
Parent Information:					
Name		Phone	(w)		
E-Mail			Phone (c)		
Camp Session you wish	to attend				
SESSION 1	☐ SESSION 1	☐ SESSION	12	☐ SESSION 2	
FULL	July 7 to 10	July 14 t	o 17	July 14 to 17	
	1PM to 4PM	9AM to	12PM	1PM to 4PM	
☐ SESSION 3	☐ SESSION 3	☐ SESSION	14	☐ SESSION 4	
July 21 to 24	July 21 to 24	July 28 t	o 31	July 28 to 31	
9AM to 12PM	1PM to 4PM	9AM to		1PM to 4PM	
Office	☐ Youth S ☐ Youth M ☐ amp (Ages 7 to 13)	☐ Youth L ☐ Youth XL	☐ Adult S ☐	□Adult M □ Adult L □ Ad	ult XL
		QTY: _	\$189.2	9 + HST = \$213.89 per Session	on
		SUBT	ГОТАL:		
		TOTAL FEE	S DUE:		
	Payment Method:	□ Cash □	Cheque	Debit Gift Card	
		☐ MasterCard ☐	l Visa □	Amex E-Transfer	
		Pacaivad Ru:	11	NVOICE #	

