



Eagle Golf Academy Private & Group Registration Form

Register by contacting GARY JEFFREY at garyjeffrey.golfpro@bell.net

or the Golf Shop at Brooklea Golf & Country Club 705 - 526-9872 Ext. 213 or 705 - 441-5354

Forms can be dropped off at Brooklea Golf Club or mailed to: GARY JEFFREY, CPGA Professional,
c/o Brooklea Golf Club P.O. Box 97 Midland, Ontario L4R 4K6
Credit Cards or Debit may be accepted at Brooklea Golf Shop

Please take the time to fill out the registration form below.

PRIVATE INSTRUCTION

SINGLE LESSONS

- 1 PERSON: ☐ 30 MINUTES - \$ 50 ☐ 60 MINUTES - \$ 75 ☐ 90 MINUTES - \$ 100
2 PERSONS: ☐ 30 MINUTES - \$ 80 ☐ 60 MINUTES - \$100 ☐ 90 MINUTES - \$ 130
3 / 4 / 5 / 6 PERSONS: ☐ 60 MINUTES ☐ 90 MINUTES - PLEASE CHECK FOR PRICING

LESSON SERIES OF 6

- 1 PERSON: ☐ 30 MINUTES - \$ 250 ☐ 60 MINUTES - \$ 375 ☐ 90 MINUTES - \$ 500
2 PERSONS: ☐ 30 MINUTES - \$ 400 ☐ 60 MINUTES - \$ 500 ☐ 90 MINUTES - \$ 650
3 / 4 / 5 / 6 PERSONS: ☐ 60 MINUTES ☐ 90 MINUTES - PLEASE CHECK FOR PRICING

Note: All rates subject to 5% GST

Name: _____ Last Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____-_____-_____ Work / Cell: _____-_____-_____

E-mail Address: _____

Birth date: (Jr. Only) Year _____ Month _____ Day _____ Gender: Male _____ Female _____

Method of Payment: Cash: _____ Cheque: _____ (Preferred) or Credit Card: _____ (last 4 digits only)

Please make cheque payable to: GARY JEFFREY

The participant assumes all risks associated with his/her participation in the clinics offered by Gary Jeffrey Sports/Eagle Golf Academy/Brooklea Golf & C.C. Gary Jeffrey Sports/Eagle Golf Academy/Brooklea Golf & C.C. accepts no liability for bodily injury, death, or property loss due to any cause whatsoever, including without limits, negligence on the part of Gary Jeffrey Sports/Eagle Golf Academy/Brooklea Golf & C.C., including all employees/agents. The participant and his/her guardian waive any/all claims they may now and in the future have and release from all liability, Gary Jeffrey Sports/Eagle Golf Academy/Brooklea Golf & C.C. and its agents. I understand that photos may be taken during the program. If required, I authorize staff to direct emergency care ranging from first aid to transportation to a medical facility.

Signature: _____ Date: _____