Golf Lessons



The Bridgewater Recreation Department is partnering with the Raritan Golf Range to offer golf classes for Bridgewater residents ages 16 – 116! Whether you are a beginner or an experienced player looking to up your game, these clinics will benefit you. The focus will be on providing a good foundation and learning and improving the golf swing and all other basics such as putting, short game, long irons, and woods. Instruction will be provided by Hans Willis of Willis Athletics.

Participants may choose from the following sessions Session 1: Tuesdays, 7:00 p.m. – 8:00 p.m. September 11, 18, 25, October 2, 2018* Session 2: Thursdays, 7:00 p.m. – 8:00 p.m. September 13, 20, 27, October 4, 2018* *Make-up dates will be available in the event of inclement weather, religious observances, business travel, etc. Location: Raritan Golf Range, Orlando Drive, Raritan

Cost: \$95 payable to Willis Athletics, plus additional \$7 per lesson for balls* (paid to golf range at each lesson) *This is a \$2.00 discount per bucket! Participants in our clinic will enjoy this discount all year, even when not taking lessons – a great benefit!

Space is strictly limited, registration will be on a first come, first served basis, <u>no exceptions</u>! Registration will be accepted in person at the Bridgewater Recreation Department, 100 Commons Way, via the postal service, or by placement in the Recreation drop slot on the Garretson Road side of the Administration Building. If you have any questions please call the Recreation Department at (908)725-6373. Office hours are 9 a.m. to 5 p.m. Monday – Thursday and 8 a.m. to 5 p.m. on Fridays.

Bridgewater Recreation, 100 Commons Way, Bridgewater, NJ 08807 (908)725-6373 www.bridgewaternj.gov 9 a.m. – 5 p.m. Monday – Thursday 8 a.m. – 5 p.m. Friday

Golf Fall 2018		\$95 payable to Willis Athletics checks only please		
Participant's Last Name	First Name	Date of Birth		
Street Address	Town		Zip	
()	()	()		
Home Phone #	Participant Cell #	Participant Work #	Participant Work # (or parent cell # if under 18)	
		Tuesday	Thursday	
Email – please print legibly, all correspondence will be sent via email		Please Circle S	Please Circle Session Attending	

 \Box By checking this box, I am indicating that the participant has individual needs due to a disability. I need to be contacted regarding reasonable accommodations as per the ADA and will be notified regarding special considerations. Note: The Bridgewater Recreation

Due to the nature of certain activities, injuries may occur. Please note the Bridgewater Township Recreation Department does not provide individual Medical coverage for its participants. Each participant will be covered under his/her family's medical policy. It is recommended that families have insurance before the parent or child participates. The Recreation Department reserves the right to cancel, alter, supplement, limit registration or change any other information.

Signature (required)_

Department will need this form three (3) weeks prior to the start date.

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Date		
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