



Junior Golf

Bridgewater Recreation is excited to offer golf classes for Bridgewater Residents ages 7 – 15 at the Raritan Golf Range! The focus will be on providing a good foundation and learning and improving the golf swing, along with all other basics such as putting, short game, long irons, and woods. Instruction will be provided by Hans Willis of Willis Athletics.

Dates and times are as follows:

Ages 7 -11: Tuesdays, 4:00 p.m. – 5:00 p.m. September 11, 18, 25, October 2, 2018 (make-up date 10/9)

or Fridays, 4:00 p.m. – 5:00 p.m. September 14, 21, 28, October 5, 2018 (make-up date 10/12)

Ages 12 – 15: Tuesdays, 5:05 p.m. – 6:05 p.m. September 11, 18, 25, October 4, 2018 (make-up date 10/9)

or Fridays, 5:05 p.m. – 6:05 p.m. September 14, 21, 28, October 5, 2018 (make-up date 10/12)

FLEXIBILITY! Willis Athletics understands busy kid’s schedules and guarantees you will receive 4 lessons!

Location: Raritan Golf Range, Orlando Drive, Raritan (next to Stop & Shop)

Cost: \$95 payable to Willis Athletics, plus \$7 per lesson for balls* (paid to golf range at time of 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 is on a first come, first served basis, no exceptions! 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 Bridgewater 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

Junior Golf Fall 2018

\$95 payable to Willis Athletics checks only please

Participant’s Last Name First Name Age as of 9/11/18 / / Date of Birth

Home Address Town Zip

Home Phone # Parent Cell # Parent Work #

Ages 7-11: Tues @ 4 or Fri @ 4 / **Ages 12-15:** Tues @ 5:05 or Fri @ 5:05

Email – please print legibly, all correspondence will be sent via email Please Circle Session Attending

___By checking here, I am indicating that my child has special needs due to a disability. I need to be contacted regarding reasonable accommodations as per the ADA for my child and will be notified regarding special considerations for my child. Note: The Bridgewater Recreation Department will need this form three (3) weeks prior to the deadline date.

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 child participates. The Recreation Department reserves the right to cancel, alter, supplement, limit registration or change any other information.

Parent/Guardian Signature (required) _____ Date ____/____/____