

# **MCG Academy Junior Golf Camp**

## **Emergency Contact Form**

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Child Name (Print)

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Name of Parent/Guardian (Print)

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Signature of Parent/Guardian

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Emergency Contact Name

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Emergency Contact Phone

Below, list any food allergies or medical conditions our Instructors need to be aware of during your child's participation in Junior Camp:

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During the camp, we may take photos to use for our own purposes or for advertisements. Please indicate if you authorize below:

Yes\_\_\_\_\_

No\_\_\_\_\_