GOLF CAMP REGISTRATION

Registration is processed on a first-come, first-served basis; members have priority. Please return this form and payment to:

Le Triomphe Golf and Country Club 100 Club Blvd. | Broussard, LA 70518

You may also email these documents to lleger@letriomphe.com.

Child's Name: _____

Girl or Boy Age:	Birthday (m	m/yr):	Left-Handed?	
Allergies:				
Parent Name(s):				
Home #:		Ce	ell#:	
Email Address:			_	
Address:				
City:			Zip:	
PAYMENT Please check one of the following: Please check the session(s):				
i lease check one of th	ie ionowing.	1 lease	check the session(s).	
☐ Member \$250.00			ion 1 – June 11 th -14 th	
□ Non-member \$300.00		□ Sess	☐ Session 2 – July 16 th -19 th	
Choose Payment Meth	ıod:			
☐ Member Charge. Name & Member Number: ☐ Check Enclosed				
☐ AmEX ☐ Master	Card 🗆 Vis	sa		
Card Number:				
Exp. Date:	CVV (Code:		
Signature:				

CAMP SESSIONS

Session 1: June 11th-14th, 2024 Session 2: July 16th-19th, 2024 Both sessions from 9 am – 1 pm

CONSENT

Le Triomphe Golf and Country Club cannot be held responsible for an illness or accident occurring either at or away from Le Triomphe. If an accident or illness should occur during the Summer Camp Program, Le Triomphe has your permission to obtain emergency medical care by qualified medical personnel for your child(ren). Also communicate any food allergies to our staff.

Parent's Signature:

Date:
Le Triomphe is requesting parental permission for your child to be featured on social media outlets or advertising publications (Le Triomphe Facebook Page, Le Triomphe Website, Camp Website) solely for promotional purposes.
Initial:

Cancellation Policy: There will be a charge of 50% of the camp fee per child should you cancel within 72 hours of the first day of camp. Thank you for your understanding and cooperation.