

# Registration Form

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 Steve at [sgoracy@letriomphe.com](mailto:sgoracy@letriomphe.com).

Child's Name: \_\_\_\_\_

Girl or Boy Age: \_\_\_\_\_ Birthday (mm/yr): \_\_\_\_\_ Left-Handed? \_\_\_\_\_

Allergies: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Payment

Please check one of the following:

Member \$250.00

Non-member \$300.00

Please check the session(s):

Session 1 – June 15<sup>th</sup>-18<sup>th</sup>

Session 2 – July 13<sup>th</sup>-16<sup>th</sup>

Total Due: \_\_\_\_\_

Member Name and Account Number: \_\_\_\_\_

Check Enclosed

AmEX       MasterCard       Visa

Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Signature: \_\_\_\_\_

# Camp Sessions

**Session 1: June 15<sup>th</sup>-18<sup>th</sup>, 2021**

**Session 2: July 13<sup>th</sup>-16<sup>th</sup>, 2021**

## Authorization/Consent

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).

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Le Triomphe is requesting parental permission for your child to be featured on social media outlets (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.