

Academy Class Registration Form

September 2020-May 2021

Junior Golfer 1 Name and Age : _____

Junior Golfer 2 Name and Age : _____

Parent/Guardian Name and Cell for Texts: _____

Parent/Guardian Email: _____

Class Location/Day/Time Select One:

- RIVER PLANTATION | Tuesday Class.....4:30-5:30pm | Ages 7-11
- OAKHURST | Wednesday Class.....4:30-5:30pm | Ages 7-11
- OAKHURST | Thursday Class.....4:30-5:30pm | Ages 7-11
- OAKHURST | Saturday Class.....1:00-2:00pm | Ages 12-15

Package Choice Select One:

- Recreation Package.....no commitment \$50 drop in class fee or \$175 month to month
- Player Package.....\$165 per month X 3 months of classes
- Mini-Tour Package.....\$155 per month X 6 months of classes
- Pro-Tour Package.....\$140 per month X 9 months of classes

Family Discounts: 10% off each additional family member.

Please read the policies and initial below.

I have read the Covid-19 Health Safety Guidelines (_____ parent/guardian initials)

I understand that my junior golfer will need to have his/her own set of clubs. (_____ parent/guardian initials)

I have read the Group Cancellation & Individual Make-up Policy (_____ parent/guardian initials)

I have read the "Other Info" regarding group class for the JMGA (_____ parent/guardian initials)

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Covid-19 Healthy Safety Policy for Golf Groups

- IF your junior tests positive for Covid-19 you may withdraw your junior from the program and receive a refund (except for the non-refundable annual registration fee).
- Mandatory masks indoors, optional masks outdoors
- 6-foot safety, social distance at stations and during drills.
- Each junior MUST bring their own golf equipment (clubs, glove, tees, etc.) to class each week. No sharing except between siblings.
- Limit group sizes to no more than 6 juniors at a location (ex: putting green, driving range)
- Limit 2 juniors per station (one in activity, one in safety zone)
- Sanitize shared teaching aids between junior use (ex: superspeed sticks)
- No junior will be admitted into class with a fever of 100.4 degrees or above or other signs of illness. Please stay home if sick.

Group Cancellation & Individual Make-up Policy

- JMGA reserves the right to cancel any class for less than the minimum 4 registrant requirement per class.
- A cancelled class due to weather or staffing issue will result in a scheduled make-up date set by JMGA on a Friday, Saturday, or Sunday within 30 days of the cancelled class.
- Individual program participants register for specific class dates and times. Unless JMGA cancels a class and provides a makeup date, the attendance of the scheduled classes is the responsibility of the individual participant. JMGA does not provide makeup classes or allow participants to attend a different class. NO REFUNDS for missed classes by an individual.
- For an individual who must miss a scheduled class for illness or family emergency JMGA will provide a \$30 lesson credit for a private lesson with Janean. The credit will be applied toward the full private lesson fee of \$40, therefore a balance of \$10 is owed for the private lesson. The \$30 lesson credit will expire 30 days after the missed class. NO REFUNDS for missed classes by an individual.

Other Info

- JMGA will only collect money by the class or monthly fees. No semester tuition collected all at once.
- JMGA will accept cash, check, credit card, Venmo or Zelle as acceptable forms of payment.
- JMGA will require monthly class payment by the 5th of each month or same day for pay by the class.
- JMGA recognizes a few months have 3 classes scheduled, other months have 4 classes and some months even have 5 classes. The monthly fee is the same for each month regardless of the number of classes scheduled for that month. This is first and foremost a long-term junior golf development program. JMGA desires your junior to participate in the OP36 after-school program year-round (except summer will have a different summer camp schedule). Therefore, there are optional payment plans to accommodate your family's budget and needs.
- JMGA covers Conroe ISD, Humble ISD, New Caney ISD and private schools within the areas around Oakhurst and River Plantation. Because each school district has separate academic calendars the only holidays observed will be Thanksgiving week and Christmas to New Year's Break. Fall Break, and Spring Break will not be observed because each district observes them at different times.

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ASSUMPTION OF RISK AND RELEASE AGREEMENT

Assumption of Risk: As parent or legal guardian of participant, I am aware that the Activity involves inherent risks, dangers, and hazards that can result in serious personal injury or death. I am also aware that the facilities and/or equipment contain dangers and can cause serious injury or death. I and Participant hereby freely agree to assume and accept all known and unknown risks of injury arising out of the Activity including injury or death that results from the Janean Murphy Golf Academy or OHGC/RPGC negligence, design of the facility and/or equipment, or from any third party.

Release and Indemnity: In exchange for the Janean Murphy Golf Academy (JMGA) and Oakhurst Golf Club (OHGC)/River Plantation Golf Club (RPGC) allowing the junior Participant to participate in the Activity, I and Participant understand and expressly acknowledge that we, on our own behalf and on behalf of the other members of our family, including spouse, parents, children, heirs, and assigns, release, discharge, waive, relinquish, covenant not to sue, indemnify and hold harmless from any and all claims, actions, demands, costs, liabilities, expenses or judgments whatsoever, including attorneys' fees and costs, the JMGA and OHGC/RPGC, its parent company, affiliated or subsidiary companies, and all their respective officers, directors, agents, contractors, employees, heirs, successors, assigns, volunteers and guests ("Released Parties") from all liability for any injury, death, loss or damage connected in any way whatsoever to participation in Activity that may result from the JMGA or OHGC/RPGC negligence or willful misconduct of any third party, design of the facility and/or equipment, whether arising either directly or indirectly out of participating in an event or activities or from any third party, whether on or off the OHGC/RPGC's premises and including any transportation. It is the intention of the parties hereto that I will indemnify and protect the JMGA, OHGC/RPGC and Released Parties from the consequences of acts or omission of the JMGA, OHGC/RPGC and Released Parties or any third party (including others who may be participating), who may have a claim or cause of action against the JMGA, OHGC/RPGC and Released Parties that arose by, through, or under Participant, in whole or in part.

Property Loss: All personal property brought to the Activity is brought at the sole risk of the Participant as to its theft, damage, or loss or injury to any other third party.

Medical: I give my consent to emergency medical care and transportation to obtain treatment in the event of injury, as the Club may deem appropriate. I agree to accept full responsibility for and to pay for the cost of medical care, transportation and any other incidental expenses due to health, accident, or failure to conform to rules and guidelines established by the JMGA, OHGC/RPGC and the person in charge of the Activity. I further agree to release and hold harmless the JMGA, OHGC/RPGC, affiliated or subsidiary companies, and all their respective officers, directors, agents, contractors, employees, heirs, successors, assigns, volunteers and guests, whether associated with the Activity or not, arising from and extending to any and all liability arising out of or in any way connected with such provision of medical or surgical treatment or transportation provided in the event of an emergency.

Photograph Permission: I give permission for the JMGA to use photographs, film footage, or tape recordings that may include participant's image or voice for purposes of promoting the JMGA programs.

Severability: Any provision of the Release found to be invalid by the courts having jurisdiction shall be invalid only with respect to such provision or portion. The remaining provisions hereof, shall be construed and enforced to the same effect as if such offending provision thereof had not been contained herein.

For Junior 1 _____ and Junior 2 _____

Signature of Parent/Legal Guardian: _____

Date: _____

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EMERGENCY/MEDICAL TREATMENT

Name of Junior Participant 1 & Age: _____

Name of Junior Participant 2 & Age: _____

Please check below if your child (designate child 1 or 2) has allergies or sensitivity to:

___ Bee Sting ___ Nuts ___ Dairy ___ Latex ___ Other: _____

List Required Medications and Dose Amounts (for child 1 &/or 2):

Please check below if your child (designate child 1 or 2) has:

Asthma Diabetes Seizure Disorder Heart Condition

Other Medical Condition: _____

List Required Medications and Dose Amounts (for child 1 &/or 2):

Other Medications (for child 1 &/or 2):

Medical History (ex., diabetes, or epilepsy), Special Conditions/Needs (for child 1 &/or 2):

People to whom the Participant(s) may be released:

Name: _____ Phone: _____

Name: _____ Phone: _____

I hereby give my permission to have my child/children taken to the physician, dentist, or hospital for medical treatment if an accident or serious illness occurs.

Mobile: _____ Home: _____ Work: _____

Parent/Legal Guardian Print Name: _____

Parent/Legal Guardian Signature: _____

Date: _____

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