



# Intro to Golf (3rd-5th Grade)

Redwood City Parks, Recreation & Community Services | [www.teamsideline.com/redwoodcity](http://www.teamsideline.com/redwoodcity)



**PLEASE COMPLETE AND RETURN TO RED MORTON COMMUNITY CENTER - 1120 ROOSEVELT AVE, REDWOOD CITY**

**REGISTRATION DEADLINE: Thursday, April 2nd, 2026. | CONTACT: Mike Smith 780.7254 [msmith@redwoodcity.org](mailto:msmith@redwoodcity.org)**

**REGISTRATION FEE: \$110**

**INFORMATION:** Program runs 4/16-5/21/26, Thursdays, from 4pm-5pm at Hawes field. Designed for those new to the game of Golf. Coaches will focus on teaching the basics of golf (putting, chipping, pitching, and driving) and utilize SNAG training equipment and curriculum. Participants will also be introduced to golf terminology, game play/scoring, and etiquette.

**REFUND POLICY:** If a class is cancelled by the department, a full refund will be issued. Class cancellations made one (1) week prior to the class start date will receive a refund less a \$5 cancellation fee. Participants who wish to withdraw from a class less than one (1) week prior to the start date will receive a department credit which may be applied to any future recreation department activity, less the \$5 cancellation fee. In general, no refunds or credits will be issued after the class begins.

## ACTIVITY REGISTRATION

PARTICIPANT'S NAME First & Last	BIRTHDATE (mm/dd/yy)	GRADE	SCHOOL	GENDER (circle)	PROGRAM #	Fee
				M / F / NB / O	46.231	\$110

Permission to walk home alone? If yes, check the box.

Total Fees \$ \_\_\_\_\_

I wish to donate to the Youth Scholarship Fund + \$ \_\_\_\_\_

Less Credit on Account - \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

## PRIMARY CONTACT (Adult)

## COMPLETE ENTIRE FORM

Name \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender \_\_\_\_\_ (Circle one) M F Non Binary Other

Street Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Email Address \_\_\_\_\_ Check box to receive promotional emails

Primary Phone (\_\_\_\_) \_\_\_\_\_ Secondary Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Cell Phone Carrier (if you wish to receive important text alerts- ATT, Verizon, etc.): \_\_\_\_\_ Emergency Contact \_\_\_\_\_

Relationship to participant \_\_\_\_\_ Emergency Daytime Ph:(\_\_\_\_) \_\_\_\_\_ Emergency Evening Ph:(\_\_\_\_) \_\_\_\_\_

## LIABILITY WAIVER & PHOTO RELEASE (Adult)

**LIABILITY WAIVER** (all classes require the signature of each Registering Adult or the Parent or Guardian of any Minor(s). Permission to participate in the following programs, including associated travel sponsored by the City of Redwood City Parks, Recreation & Community Services Department is given for me and/or child as named below. In consideration of participation in these programs, I hereby indemnify and hold harmless and release the City of Redwood City, its agents, its employees and volunteers working for the City, from any and all liability for injury suffered by me or my child arising from or connected with these programs. I assume all risk for any injuries, including the risk of exposure to communicable diseases as a result of my child's and/or my participation in the program. To the extent I and/or my child are participants of virtual recreation classes, I acknowledge I am responsible for ensuring my child's and/or my environment is safe/free from obstructions and that any use of third-party applications (Zoom, Microsoft Teams, etc.) is done at our own risk. I sign of my own free will. **Sign Below**

**PHOTO RELEASE: I/we agree to allow use of my/our photograph in program publicity. I have read and fully understand these policies. Initial Below**

<input checked="" type="checkbox"/>	Waiver Signature	Photo Release Initial
	Print Name _____ Date _____	

## PAYMENT



CREDIT CARD

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_ (3 or 4 digit #) \_\_\_\_\_

Signature X \_\_\_\_\_

Name on Card (print) \_\_\_\_\_

CHECK

Payable to: CITY OF RWC

\$15 returned check fee

CASH