



2019 Get Golf Ready Clinics

Name _____

Email _____

Phone Number _____ email _____

Do you need to borrow clubs? Yes RH or LH No _____

Please circle the clinic you are registering for:

Tuesday Evenings 5:30-7:00 p.m. (Instructor: Robert Gage, PGA)

April 23, April 30, May 7.....Rain Date: May 14

May 21, May 28, June 4.....Rain Date: June 11

Wednesday Evenings 5:30-7:00 p.m. (Instructor: Allison Davey, Head Golf Professional)

April 24, May 1, May 8.....Rain Date: Friday, May 11

May 29, June 5, June 12.....Rain Date: Friday, June 14

Thursday Evenings 5:30-7:00 p.m. (Instructor: Robert Gage, PGA)

April 25, May 2, May 9.....Rain Date: May 16

May 23, May 30, June 6.....Rain Date: June 13

Saturday Mornings 9:30-11:00 a.m. (Instructor: Robert Gage, PGA)

April 27, May 4, May 11.....Rain Date: May 18

June 8, June 15, June 22.....Rain Date: June 29

Please include payment with this application as we are unable to reserve space without payment

(\$125). Cash or check payments only. **For clinics with Robert Gage, please write checks payable**

in his name. For clinics with Allison Davey, please write checks payable to her name or Willow Brook. Note, payment is nonrefundable unless we are able to fill your space.

Mailing Address: Willow Brook Golf Course, 124 Brookfield St, South Windsor, CT 06074

Thank you and we look forward to working with you!

How did this person pay? Cash? Check?
