



2010 Spring After School Program
Registration Form

Student's Name First Last

Address

City State Zip

Telephone Email

Date of Birth Age Sex

Years Playing _____ Skill Level Beginner
 Intermediate
 Advanced

April 20 thru June 5, 2010

Days Attending Tuesday Wednesday Thursday
 Friday Saturday

Payment Options: MasterCard, Visa, Cash, Check, Money Order

Make check payable to: **Laudien Golf Enterprises Inc.**

Mail check and this application to:

Michael Laudien
PO Box 493
Theills, NY 10984