PELHAM PARKS AND RECREATION

6 Village Green, Pelham, NH 03076

Phone: 603-635-2721 Email: Recreation@pelhamweb.com Fax: 603-508-3094



2024 ADULT GOLF LESSONS -Session 2

The 2024 summer adult golf lessons will be run at Windham Country Club. The one-hour lessons will be given once a week for 4 weeks and will emphasize the skills of the game in a challenging environment. Space is limited. First come, first served. **Bring a club or borrow one of theirs at no charge.** These lessons are designed for the basic beginner golfer or golfers with experience.

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WHEN: TIMES: WHERE: COST:	TIMES: 6:00pm – 7:00pm WHERE: Windham Country Club, Windham, NH (off Londonderry Rd.)	
(Print) Your Name		Cell or Home Phone
Address (including city-to	 own/state)	
Email address:		DOB (required):
REL	EASE AND WAIVER OF LIA	ABILITY AND INDEMNITY AGREEMENT
discharge and covenant not to loss or damage and any claim except in the case of gross of otherwise while the named par l/we further agree to indemnify damage including but not limite agents and employees becoming judgments, again the Town of resulting in the death of the	sue the Town of Pelham, Parks and or demands thereof on account of r willful wanton negligence of the Tticipant participates in the Golf Programmer of Pelham Parks and Read to bodily injury, illness, death or pelegally obligated to pay including relham Parks and Recreation Dept.	ecreation Dept., their agents and employees from any and all liability, loss of property damage which the Town of Pelham Parks and Recreation Dept., their easonable attorney's fees and costs, as a result of claims, demands, costs of their agents and employees on account of injury to the person or property of the gross or willful wanton negligence of the Town of Pelham Parks and
Parks and Recreation Dept. the assume the risk of participating the transportation of me to and	nat to the best of my knowledge, I g. I/we understand that the above p d from these activities and I/we relea	rain on my body, or its parts and therefore I represent to the Town of Pelham am in proper physical condition to allow myself to participate and that I/we brogram is at the Windham Country Club and I/we accept full responsibility fo ase, indemnify and hold harmless persons providing any transportation. I/we a emergency medical card with the instructor.
permission to the attending pl	hysician to treat, hospitalize, adminity to leave an emergency medical for	ed. If it is impossible to contact me and it is an emergency, I/we hereby given hister anesthesia or to order injections or surgery for the safety of myself. orm with Parks and Recreation and that photos or videotaping of this program
	, the undersigned, have read this re I/we have executed this release on t	elease and understand all its terms. I/we execute it voluntarily and with willfuthis date indicated next to name(s).
Signature of Participant:		Date:
Emergency contact:		Phone:

Make checks payable to The Town of Pelham.

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