PELHAM PARKS AND RECREATION

6 Village Green, Pelham, NH 03076

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



2024 SPRING ADULT LESSONS

The 2024 spring 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:	4 Thursdays, May 2 6:00pm – 7:00pm	3 rd to June 13 th		
WHERE:	Windham Country C	Windham Country Club, Windham, NH (off Londonderry Rd.)		
COST:	\$159 per player			
(Print) Your Name		Cell or Home Pho	ne	
Address (including city-to	pwn/state)		_	
Email address:		DOB (required):		
REL	EASE AND WAIVER OF LIA	BILITY AND INDEMNITY AGREEMENT		
discharge and covenant not to loss or damage and any claim except in the case of gross of	sue the Town of Pelham, Parks and lor demands thereof on account of in	elham Parks and Recreation Adult Golf Program, I/we shall release, we Recreation Dept., their agents and employees from all liability for any are an applying to the person or property or resulting in death of the named particition of Pelham, Parks and Recreation Dept., its agents and employeed am.	nd all ipant	
damage including but not limite agents and employees become judgments, again the Town of resulting in the death of the r	ed to bodily injury, illness, death or pro e legally obligated to pay including re- Pelham Parks and Recreation Dept. t	creation Dept., their agents and employees from any and all liability, lost operty damage which the Town of Pelham Parks and Recreation Dept., asonable attorney's fees and costs, as a result of claims, demands, cost their agents and employees on account of injury to the person or proper of gross or willful wanton negligence of the Town of Pelham Parks uch liability is sole, joint or several.	their ts or ty or	
Parks and Recreation Dept. the assume the risk of participating the transportation of me to and	nat to the best of my knowledge, I a g. I/we understand that the above pro I from these activities and I/we releas	in on my body, or its parts and therefore I represent to the Town of Pelam in proper physical condition to allow myself to participate and that ogram is at the Windham Country Club and I/we accept full responsibilities, indemnify and hold harmless persons providing any transportation.	I/we ty for	
permission to the attending ph	nysician to treat, hospitalize, administy to leave an emergency medical for	I. If it is impossible to contact me and it is an emergency, I/we hereby ster anesthesia or to order injections or surgery for the safety of myserm with Parks and Recreation and that photos or videotaping of this progr	elf. I	
	, the undersigned, have read this release on the	ease and understand all its terms. I/we execute it voluntarily and with ${\sf v}$ is date indicated next to name(s).	villful	
Signature of Participant:		Date:		
Emergency contact:		Phone:		

Make checks payable to The Town of Pelham.

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