

# Come on Barbie! Let's go Par-Tee!

Join us for a fun morning of Barbie themed golf activities and games!

Where: Raymond Memorial Golf Course, 3860 Trabue Road

When: Friday, June 13 from 9:00 am – 11:00 am

Who: Golfers of any skill level, ages 5-12

Cost: \$60 (includes instruction, balls, and prizes)



Please mail this registration form and a check for \$60 (payable to Kelly L. Trent Pro Shop) to:

Kelly Trent  
2584 Edington Road  
Upper Arlington, Ohio 43221  
kltrent@columbus.gov  
Questions: 614-832-7569

Golfer Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Parent email: \_\_\_\_\_

Golfer age: \_\_\_\_\_ Does golfer have clubs? Yes\_\_\_ or No\_\_\_

Is golfer right or left handed? (Circle one)

I understand that by signing this waiver I certify that all the above information is correct and that the person is physically fit to compete in golf. Also by signing, I do hereby, for myself, executors, administrators, and person, waive release and forever discharge any and all rights and claims for damages which may occur or which may hereafter occur to the person against the Columbus Recreation and Parks Department, The Kelly Trent Pro Shop, volunteers, respective officers of the City of Columbus, or The Kelly Trent Pro Shop and/or assign for any and all damages which may be attained by the athlete listed above.

PARENT/GUARDIAN SIGNATURE

DATE



## PHOTOGRAPHY/VIDEOTAPING AUTHORIZATION, WAIVER AND RELEASE

The undersigned hereby acknowledges and grants the City of Columbus permission to use their likeness in a photograph or video in any and all of its publications, including websites and social media pages, without payment or any other consideration.

The undersigned agrees that these photos/videos are the property of the City of Columbus.

The undersigned hereby irrevocably authorizes the City of Columbus to edit, alter, copy, exhibit, publish or distribute the photo/video for purposes of publicizing the City of Columbus's programs or for any other lawful purpose. In addition, the undersigned waives the right to inspect or approve the finished product, including, written or electronic copy, wherein their likeness appears.

Please sign below:

\_\_\_\_\_ PARTICIPANT NAME

\_\_\_\_\_ PARENT/GUARDIAN NAME

\_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE