

## **2026 Raymond Memorial GC July Competitive Junior Golf Camp**

Kelly L. Trent, the premier junior golf instructor in Central Ohio, is offering a 3-day golf camp for junior golfers aged 10-15 who desire to play competitive golf for their school. This camp offers juniors the opportunity to hone their skills in preparation for school golf tryouts. A strong focus will be on game management and skill development. The end goal is to prepare the junior golfer physically and mentally for the fall golf season.

Each day will consist of two hours of instruction, followed by 9 holes of supervised, on-course play. The student to teacher ratio is no more than 10:1. This camp is not intended for novice golfers.

**Please have your child bring a bag for lunch. We will serve pizza for the kids on the last day.**

Please fill out the enclosed application form.

All checks should be made out to Kelly Trent Pro Shop in the amount of \$360.00 (no refunds).

<b>MONDAY</b>	<b>JULY 20:</b>	<b>8:00 A.M. - 2:00 P.M.</b>
<b>TUESDAY</b>	<b>JULY 21:</b>	<b>8:00 A.M. - 2:00 P.M.</b>
<b>WEDNESDAY</b>	<b>JULY 22:</b>	<b>8:00 A.M. - 2:00 P.M.</b>

**Registration is on a first come, first served basis. We need to have at least 10 juniors to hold camp.**

Please call 614-832-7569 if you have any questions and ask for Kelly Trent or email me at [kltrent@columbus.gov](mailto:kltrent@columbus.gov)

**RAYMOND MEMORIAL GOLF COURSE  
2026 COMPETITIVE GOLF CAMP APPLICATION  
JULY 20-22, 2026**

**NAME** \_\_\_\_\_

**HOME PHONE** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**MALE** \_\_\_\_\_ **FEMALE** \_\_\_\_\_ **BIRTH DATE** \_\_\_\_\_ **AGE** \_\_\_\_\_

**PARENT NAME** \_\_\_\_\_ **WORK PHONE** \_\_\_\_\_

**PARENT NAME** \_\_\_\_\_ **WORK PHONE** \_\_\_\_\_

**IN CASE OF EMERGENCY:**

**NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**I UNDERSTAND THAT BY SIGNING THIS APPLICATION 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 PERSONS, WAIVE  
RELEASE AND FOREVER DISCHARGE ANY AND ALL RIGHTS AND CLAIMS  
FOR DAMAGES, WHICH MAY OCCUR, OR WHICH MAY HERAFTER OCCUR,  
TO THE PERSON OR AGAINST THE COLUMBUS RECREATION AND PARKS  
DEPARTMENT VOLUNTEERS, RESPECTIVE OFFICERS OF THE CITY, RAYMOND MEMORIAL  
GOLF COURSE AND ALL PERSONNEL AND/OR  
ASSIGNED, FOR ANY AND ALL DAMAGES, WHICH MAY BE ATTAINED BY THE ATHLETE.**

**PARENT OR GUARDIAN** \_\_\_\_\_

**FEE: \$360.00 (no refunds) CHECK  CASH  CHECK (Payable to Kelly Trent Pro Shop)**

**VISA  MASTERCARD Exp. Date:** \_\_\_\_\_

**Card #: \_\_\_\_\_ 3 Digit Code \_\_\_\_\_**

**Name on Card: \_\_\_\_\_**

**MAIL TO: KELLY TRENT 2584 EDINGTON ROAD COLUMBUS, OHIO 43221**



## **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:

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

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

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