



## **WELCOME TO ST.CROIX JUNIOR GOLF ASSOCIATION**

*Our Mission is to teach youth on the island of St. Croix, especially underprivileged youth, to play golf while promoting education, preventing delinquency, and building character and valuable life long skills.*

### **THE COST FOR THE YEAR IS AS FOLLOWS:**

**1 JUNIOR \$50.00**  
**2 JUNIORS \$75.00**  
**3 OR MORE JUNIORS \$100.00**  
**(per family)**

**Work scholarships are available on a need basis, at the discretion of the Board of Directors.**

Ambassadors and Junior Ambassadors must become members of the St. Croix Golf Association in order to maintain a handicap. The annual cost is \$10.00 payable before January 31<sup>st</sup>.

**CHECKS SHOULD BE MADE PAYABLE TO:**  
**ST. CROIX JUNIOR GOLF ASSOCIATION**

### **GOOD GRADES MAKE GOOD GOLFERS!!!**

Academic achievement is a prerequisite for your participation in the St. Croix Junior Association's golf program. All junior golfers must maintain a 2.5 grade point average or better to participate in the program. Each junior golfer is responsible for turning in their report card after each marking period.

***PLEASE READ ALL OF THE DOCUMENTS CAREFULLY AND CHECK TO MAKE SURE YOU HAVE COMPLETED ALL FORMS.***

***Mail forms and Check to SCJGA P.O. Box 7295, Sunny Isle, Christiansted, VI 00823-7295***  
***Questions? Contact, Debi Smith at [admin@stcroixjuniorgolf.com](mailto:admin@stcroixjuniorgolf.com)***



## **TO: PARENTS AND/OR LEGAL GUARDIANS**

**The St. Croix Junior Golf Association (SCJGA) was originally organized in 1994 and revived in 2004. The junior golf program provides an opportunity for juniors to learn and improve their golfing skills. SCJGA will provide a safe environment that will encourage academic achievement; discipline; fair play; sportsmanship; time management; and a pride in accomplishment. Classes are taught by golf professionals with years of experience and expertise.**

**Review the following requirements to determine eligibility to participate in this program.**

### **STUDENT REQUIREMENTS:**

- **AGE: 7 TO 17 YEARS**
- **MUST MAINTAIN A C+ or 2.5 GPA**
- **WILLINGNESS TO PRACTICE GOLF OUTSIDE OF CLASS**
- **MUST ADHERE TO ST CROIX JUNIOR GOLF ASSOCIATION CONTRACT**

### **PARENTS COMMITMENT:**

- **WILLING TO ASSIST WITH AT LEAST ONE SESSION DURING THE SPRING, SUMMER AND/OR FALL PROGRAMS.**
- **COMMITMENT TO BRING STUDENTS TO SATURDAY CLASSES IN A TIMELY MANNER IF APPLICABLE (10 MINUTES BEFORE SCHEDULED CLASS TIME).**
- **ENCOURAGE OUTSIDE PRACTICE, ON COURSE OR DRIVING RANGE**

### **SCJGA PROVIDES:**

- **MEMBERSHIP/MEMBERSHIP CARD**
- **INSTRUCTORS AND SPECIALIZED TRAINING**
- **ASSISTANCE WITH COLLEGE SCHOLARSHIPS**



**ST.CROIX JUNIOR GOLF ASSOCIATION**

**APPLICATION**

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Male** \_\_\_\_\_ **Female** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

**Telephone #s:** home \_\_\_\_\_ cell \_\_\_\_\_ office \_\_\_\_\_

**Parent's Email address:** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **SOCIAL SECURITY #** \_\_\_\_\_

**YEARS PLAYING:** \_\_\_\_\_ **AVERAGE SCORE:** \_\_\_\_\_

**LOWEST SCORE:** \_\_\_\_\_ **# of COMPETITIVE ROUNDS PLAYED:** \_\_\_\_\_

**DO YOU HAVE GOLF CLUBS? YES** \_\_\_\_\_ **NO** \_\_\_\_\_

**School:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**TIME RELEASED FROM SCHOOL:** \_\_\_\_\_

**SCHOOL PICK-UP LOCATION:** \_\_\_\_\_

**GPA:** \_\_\_\_\_

**Subjects:** 1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_ 6. \_\_\_\_\_

**Outside interest:**

\_\_\_\_\_

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## ST.CROIX JUNIOR GOLF ASSOCIATION CONTRACT

Please take time to read the following contract thoroughly. Any questions or explanations are welcome by your instructor and /or site coordinator. SCJGA encourages you and your parent/guardian to discuss these items together before either signs.

### I. BEHAVIOR

- a. SCJGA members are expected to exhibit good conduct at all times.
- b. Playful antics are dangerous and inappropriate while practicing or during a golf game.
- c. SCJGA members are expected to study and practice the rules of etiquette on and off the golf course and practice areas.
- d. Unlike many sports, golf is played, for the most part, without the supervision of a referee or umpire. The game relies on the integrity of the individual to show consideration for other players and to abide by the Rules. All players should conduct themselves in a disciplined manner, demonstrating courtesy and sportsmanship at all times, irrespective of how competitive they may be. This is the spirit of the game of golf.
- e. Any defiant behavior that the instructor and/or site coordinator considers a serious violation of SCJGA and/or USGA rules or is dangerous to others may result in dismissal from the Junior Golf Program. Including, but not limited to: fighting, cursing, intimidation, roughhousing, clowning or disrespect toward your instructor or peers
- f. If a player disregards these guidelines during a round or over a period of time to the detriment of others, it is recommended that the SCJGA will consider taking appropriate disciplinary action against the offending player. Such action may, for example, include prohibiting play for a limited time on the course or in a certain number of competitions. This is considered to be justifiable in terms of protecting the interest of the majority of golfers who wish to play in accordance with these guidelines. In the case of a serious breach of Etiquette, during practice sessions, qualifying rounds for tournament play itself, SCJGA may disqualify a player from the program and/or special events.

### II.DRESS CODE

- a. SCJGA members will adhere to a certain dress code while playing or practicing golf.
- b. SCJGA members must adhere to dress attire as per the golf course being played
- c. **Prohibited** dress includes, but not limited to; baggy pants, jeans, cutoffs, stretch pants, short shorts or swimming attire. Males shirts, must be tucked in.

- d. Hats will be worn with the bill to the front, not to the back.

III. ATTENDANCE

- a. SCJGA members must attend: a minimum of 4 weeks of the spring session which consists of 5 weeks; a minimum of 5 weeks of the summer session which consists of 6 weeks; and 11 weeks of the fall session which consists of 13 weeks in order to advance to the next session.
- b. SCJGA members are expected to be on time and prepared for activities at each session.
- c. Disciplinary measures are left up to the discretion of the instructor.

IV. SCHOLASTIC ACHIEVEMENT

- a. Academic achievement is a prerequisite for your participation in the Junior Golf Program.
- b. Any Junior Golfer who does not maintain a 2.5 or better grade point average in school will jeopardize his/her participation in the SCJGA program.
- c. Report cards will be closely examined at the end of each marking period. Two consecutive marking periods with a GPA below 2.5 may result in suspension from the program.

V. PARENT/GUARDIAN COMMITMENT

SCJGA looks forward to working closely with each of the Junior Golfer's parents/guardians. We consider our Junior Golf Program to be a shared joint venture with junior golfers, parents/guardians, and SCJGA. We encourage each parent or guardian to accompany his/her child to training sessions and remain until the session has been completed if possible. Parents are required to assist in our fundraising efforts (see Required Category on Parent Volunteer Commitment sheet).

**I have read, understand and agree to ALL of the above conditions.**

Please Print:

Name Jr. Golfer \_\_\_\_\_ Parent/Guardian \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Date: \_\_\_\_\_



## RELEASE AND PERMISSION SLIP

I hereby give permission for my child, \_\_\_\_\_ to participate in the ST.CROIX JUNIOR GOLF ASSOCIATION (SCJGA) JUNIOR GOLF PROGRAM to be held per attached schedule, at Carambola Golf and Country Club.

I the undersigned, as the parent and/or legal guardian of the child as listed above, in consideration of the request and permission for my son/daughter to participate in the SCJGA Junior Golf Program, hereby assume full responsibility for all risk of injury or loss which may result from my son's/daughter's participation in all the activities and hereby agree to hold harmless, release and forever discharge the Board, Instructors, any/all volunteers, employees of SCJGA and Carambola Golf & Tennis Club from and waive any and all claims and demands whatsoever which the undersigned and any of them or any third person and their representatives and persons acting under their behalf have or may have against said parties, their officers, agents or employees, by reason of any accident, illness, injury, or death of any person or persons or damage to or loss or destruction of any property arising or resulting directly or indirectly from my son's/daughter's participation in the aforementioned program and occurring during the participation or any time subsequent thereto. Save and accept that the above provisions shall not be applicable to injury to or death of persons, or damage to or loss of property arising out of the gross negligence of the SCJGA, their officers, agents or employees. The terms of this release shall serve as a release and assumption of risk for my son/daughter, heirs and administrators and for all of my family members. I hereby warrant that I have the authority to enter into this release on behalf of all interested persons.

I understand, agree and acknowledge that some activities may be of a hazardous nature and/or include physical and or strenuous exercise or activity. With the full understanding of the facts, I state to the best of my knowledge, my son/daughter listed above has no medical, physical, mental or emotional health condition which would hinder or prevent his/her active participation in the SCJGA Junior Golf Program.

I understand that I am required to carry accident/medical insurance coverage for the child listed above and verify that the coverage information attached herein is accurate and true.

In the case of emergency and if I cannot be reached I hereby authorize the staff of SCJGA to obtain whatever medical treatment he/she deems necessary for the welfare of my child listed above. I further understand and agree that I will be financially responsible for all charges and any/all costs in the rendering of said emergency treatment, regardless of whether or not my medical insurance covers said charges and fees.

I grant SCJGA permission to use the likeness, voice and words of my child, \_\_\_\_\_, in television, radio, films, newspapers, magazines and other media, and in any form for the purpose of advertising or communicating the purpose and activities of SCJGA and in appealing for funds to support such activities.

**Having read and understood and being in agreement with this release, I have signed and dated this INFORMED CONSENT AND RELEASE below.**

Signature of Responsible party: \_\_\_\_\_ Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.



**ST.CROIX JUNIOR GOLF ASSOCIATION**

**MEDICAL INFORMATION**

***JUNIOR GOLFER***

**NAME:** \_\_\_\_\_ **SEX: M / F** **DOB:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**PHYSICAL ADDRESS:** \_\_\_\_\_

**IN CASE OF EMERGENCY:**

**CONTACT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ALTERNATE CONTACT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**MEDICAL HISTORY:**

**ALLERGIES:**

**DRUGS:** \_\_\_\_\_ **FOODS:** \_\_\_\_\_

**BITES:** \_\_\_\_\_ (i.e. ants, bees, etc.)

**SCJGA may administer: ADVIL TYLENOL BENADRYL IBEPROPHEN**  
(circle any that apply)

**MEDICAL CONDITIONS:**

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**DATE OF LAST TETANUS SHOT:** \_\_\_\_\_

**FAMILY DOCTOR:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**NAME OF MEDICAL INSURANCE:** \_\_\_\_\_

**NAME OF SUBSCRIBER:** \_\_\_\_\_ **DOB** \_\_\_\_\_



**ST.CROIX JUNIOR GOLF ASSOCIATION**

**PARENT VOLUNTEER COMMITMENT**

**VOLUNTEER CATEGORIES:**

**GOLF PROGRAM**

- Word Processing
- E-mail/Telephone work
- Messenger Service
- Driving
- Youth Clinics
- Site Coordinators
- Chaperoning
- Newsletter/Media
- Grant Writing
- Tournament Committee
- Special Events
- Car Wash

**ANNUAL TOURNAMENT:**

- Registration table
- Raffle ticket table
- Distribute goodie bags
- Put up sponsor signs
- Coordinate junior lottery
- Coordinate dinner
- Spotter during tournament
- Shuttle spotters to holes
- Thank you ad in newspaper
- Report results in newspaper
- Driver for sponsor drive
- Miscellaneous

**REQUIRED CATEGORY (check one)**

**FUNDRAISING:**

- Corporations
- Foundations
- Individual
- Equipment
- Product
- Donations
- Other

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

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

City/Zip: \_\_\_\_\_

Telephone #s daytime: \_\_\_\_\_ Evening: \_\_\_\_\_ Fax \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_