



2023 Get Golf Ready Clinics

Name _____

Email _____

Phone Number _____

Do you need to borrow clubs? Yes RH or LH No _____

Please circle the clinic you are registering for:

Wednesday Evenings 5:30-7:00 p.m. (Instructor: Allison Davey, Head Golf Professional)

April 19, April 26, May 3rdRain Date: Friday, May 5th or Sat., May 6th

Thursday Evenings 5:30-7:00 p.m. (Instructor: Allison Davey, Head Golf Professional)

April 20, April 27, May 4thRain Date: Sat. , May 6th or

Friday Evenings 5:30-7:00 p.m. (Instructor: Ciaran Carr, Assistant Golf Professional)

April 21, April 28, May 5thRain Date: Friday, May 12th

Please include payment with this application as we are unable to reserve space without payment (**\$135**). Cash or check payments only. For clinics with **Allison Davey**, please write checks payable in her name. For clinics with Ciaran Carr, please write checks payable to **Ciaran Carr**. Note, payment is nonrefundable unless we are able to fill your space.

Mailing Address: Twin Hills Country Club, 199 Bread and Milk St., Coventry, CT 06238.

Thank you and we look forward to working with you!

How did this person pay? Cash? Check?
