Pioneer Q Tour Application

APPLICATION FORM - complete both sides

ONE FORM PER PARTICIPANT

THE PIONEER qualifying tour

walk/ride with each group. Responsibilities

of the volunteer are limited to the pace of

play of the group and the safety of the par-

ticipants. No golf instruction is expected or

allowed. Prior golf experience is a plus but not necessary. The Q-Tour committee will

instruct the volunteers before the start of

the program. Please participate! Check

available dates below.

<u>REGISTRATION</u>: Due to the popularity of this program it is sometimes necesary to choose participants by lottery. To be eligible for this lottery, application must be received by May 31, 2024. Applications received after May 31, 2024 will be accepted only if space is available (first come first serve basis).

Copy of birth certificate required.

Volunteer's Name:

Volunteers: Please check available dates.
U July 1 U July 8 July 15 July 22 July 29

Pioneer Q Tour

The Q Tour is designed for the intermediate golfer who understands the basics of the game but cannot consistently break 60 for nine holes. Limited instruction on etiquette will take place on the course. Subjects covered in this program will include: etiquette, rules of golf, course management and speed of play.

The program runs five weeks. A Q Tour official will evaluate a player's ability at the player's request and if the official deems the player to have sufficient skill and knowledge they may invite the player to join The Pioneer Tour. This, of course, will depend if space is available on The Pioneer Tour.

Mondays, July 1, 8, 15, 22, 29

Orchard Hills County Golf Course, Paramus

Fee Application Fee	Ş	\$ 20.00
Q Tour Events	+	\$ 75.00
Total Amount: MUST ENCLOSE PAYMENT WITH APPLICATION	= {	\$ 95.00
Mail completed application WITH check made payable to Bergen County Department of Parks and copy of birth certificate to: Bergen County Golf Office Soldier Hill Golf Course 99 Palisade Avenue Emerson, NJ 07630 201-336-7259	Select session: (choice Monday #1: 12:00 - 2:30 #2: 3:00 - 5:30	is not guaranteed.) Check One

MUST SEND PAYMENT WITH APPLICATION. Successful applicants will be notified via email by June 14, 2024.

Application Form

COMPLETE BOTH SIDES

Complete only one form per child. Participants may apply for only one program. Photo copies of the application are acceptable.

ALL applicants must supply COPY OF BIRTH CERTIFICATE even if they participated last year.

Participant's Last Name:		
Participant's First Name:		
Home Address:		
City/State/Zip:		
Home Phone: ()		Male \Box Female \Box
Birth date: / / Age on A	August 1, 2024	WE NEED
Copy of birth certificate required.		WE NEED VOLUNTEERS
Parent's / Guardian's Name:		VOLUNTEEKS
		ior The Pioneer Tour (Div. IV)
E-mail		and Q Tour
ALL NOTICES OR UP		
In the event of an emergency contact:	Volunteers are a critical part of the Pioneer Program. Some of the duties include walking with groups, helping	
Name:	Phone ()	with registration, overseeing activities.
		See reverse side of form for details.
Name:	Phone (

I understand The Pioneer Tour regulations and agree that this entry is subject to the approval or rejection at any time by The Pioneer Tour Committee at their discretion. I understand that the use of alcohol, tobacco, drugs or misconduct may disqualify me.

Signature of Applicant:

_Date:_____

APPROVAL AND CONSENT BY PARENT OR GUARDIAN: As a parent or guardian of the applicant, I hereby certify the facts as stated in this entry form and attest that I am familiar with his/her plans to participate and that he/she does so with my approval. I further certify in the event that emergency medical care needs to be administered to the above named applicant, and the below mentioned person cannot be contacted, the required parental consent may be given by an authorized member of the The Pioneer Tour Committee. INDEMNIFICATION AGREEMENT AND RELEASE: In consideration of the above named participant I hereby agree to indemnify, defend and hold harmless the Bergen County Department of Parks its employees and its individual golf facilities, The Pioneer Tour, and its committee members from any liability or claim or action for damages arising from my child's participation in this program regardless of the cause including the negligence of the above named entities. I understand the risks inherent in the game of golf and agree to assume the risk to my child or possible injury and to assume liability for my child's conduct.

Signature of Parent or Guardian:_____