# **High Cedars Golf Club**

## Presents 2025-Fall Junior League 18-U

Chris Ming, PGA Teaching Professional...Brandon Solomonson, Teaching Professional

### Learn-Practice-Play-Compete

| Week 1 | Sept. 23 <sup>rd</sup> , 25 <sup>th</sup>    | Week 5 | Oct. 21 <sup>st</sup> , 23 <sup>rd</sup> |
|--------|--|--------|--|
| Week 2 | Sept. 30 <sup>th</sup> , Oct.2 <sup>nd</sup> | Week 6 | Oct. 28th, 30th                          |
| Week 3 | Oct. 7 <sup>th</sup> , 9 <sup>th</sup>       | Week 7 | Nov. 4 <sup>th</sup> , 6 <sup>th</sup>   |
| Week 4 | Oct. 14th, 16th                              | Week 8 | Nov. 11 <sup>th</sup> , 13 <sup>th</sup> |

Cost for Fall League 8 weeks.... \$500 includes instruction, range balls, and green fees. Weeks 1-4 cost \$350/Weeks 5-8 \$260

#### Please make checks or cash payment to Chris Ming

### Tuesdays Instruction 3:15pm to 4:15pm, Thursday Golf tee times 3:30pm to 4:15pm

| Name                                      | Age Grade                           | Scnool                                  |                    |
|---|-------------------------------------|---|--------------------|
| Email                                     | Phone                               | Emergency Phone                         |                    |
| I assume all risks and hazards of the cor | nduct of the program and release    | from responsibility any person provid   | ing transportation |
| to and from vehicles, in case of injury o | r damages, I do hereby release an   | d hold harmless High Cedars Golf Club   | o, Inc. owners,    |
| employees, the organization, sponsors,    | supervisors or any volunteer conr   | nected with the program. In absence o   | of signature,      |
| payment of fees and participation in the  | e program shall constitute accepta  | ance of the conditions set forth in the | release. I grant   |
| full permission to use any photographs,   | , videotapes, motion pictures, reco | ordings or any other record of this pro | gram for High      |
| Cedars Golf Club, Inc. Informational or p | promotional use. Signature by Par   | ent or Guardian                         | Date               |
|   |                                     |   |                    |

Mail to: High Cedars Golf Club, Inc. 14604 149th St. Ct. E., Orting, WA 98360 Attn: Chris Ming