

Application form:

Name: _____ Age: _____
Address: _____ City, State: _____ Zip: _____
Home Phone: _____ Cell Phone: _____
Your email: _____ Parent's email: _____
Parent's names: _____ Parent's cell phone: _____
Emergency Contact: _____ Emergency contact phone: _____
High School: _____ Grade: _____

Camp Session

- | | |
|----------------------------------|----------------------------------|
| <input type="checkbox"/> Dec. 13 | <input type="checkbox"/> Dec. 14 |
| <input type="checkbox"/> Dec. 15 | <input type="checkbox"/> Dec. 16 |

Campus Tour

- | |
|------------------------------|
| <input type="checkbox"/> Yes |
| <input type="checkbox"/> No |

Make check payable to:

You will be contacted via email
when payment is received.

Derek Freeman
UCLA Men's Golf
JD Morgan Center
325 Westwood Plaza
Los Angeles, CA 90095