

# BRUCE SIMS GOLF SCHOOL

## JUNIOR ACADEMY ENROLLMENT APPLICATION

Students name: \_\_\_\_\_ DOB \_\_\_\_\_

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

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

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

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

Phone: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: \_\_\_\_/\_\_\_\_/\_\_\_\_

Credit Card Number: \_\_\_\_\_

Exp: \_\_\_\_/\_\_\_\_/\_\_\_\_ CVV: \_\_\_\_\_

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

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

**One time administration fee \$100/ non refundable**

### ACADEMY POLICIES & PROGRAM RULES

**Parents or students are responsible for scheduling all private lessons, if desired, which will come with an additional charge, by contacting:**

**Bruce Sims: 214-475-5168**

**Email: [bsims@pga.com](mailto:bsims@pga.com)**

**1. Payments must be made in full each month, and will be on a recurring schedule.**

**All students must be registered in our portal for Junior Academy.**

**2. All (4) sessions must be completed in the same month. No refunds or credit will be granted to the next month for make-up sessions unless approved by Bruce Sims.**

**3. Sessions will begin promptly at start time. Students arriving late will not be granted make up for missed time.**

**4. All Academy Students will begin in level one.**

**5. Progression through the levels are based on proficiency and knowledge of the skills for the current level.**

**The instructors will determine when the student will move to the next level based upon the skill assessment test for that level.**

**6. Developmental level is an invitation only class.**

**Students must pass an assessment challenge in order to be considered for promotion and invitation.**

**7. Students must dress appropriately for Golf.**

**8. The Academy is a year round program (12 months)**

**9. If the student is going to be away from the Academy, for more than 60 days, a new application must be submitted, and current fees will apply.**

**10. Cancellations of the Academy must be in a written form or email and submitted (30 )days in advance no exceptions.**

**11. All Vacations 30 days or more must be emailed to the Academy 30 days in advance.**

**Does student have clubs? Yes/No**

**Students borrowing clubs from Academy are required to return the clubs at the end of the session.**

**Allergies: Yes /No if yes, please specify\_\_\_\_\_**

**Parent or guardian signature\_\_\_\_\_**

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

## RELEASE OF LIABILITY-READ BEFORE SIGNING

In consideration of my minor child/ward \_\_\_\_\_ ("my child")  
being allowed to participate in this sport program, its related events and activities,  
I, undersigned, acknowledge, appreciate, and agree that:

1. The risk of serious injury from the sports activities involved in this program is always present due to the nature of the sport(s); and
2. FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and
3. I willingly agree to comply with the program's stated and customary terms and conditions for my child's participation. If, however, I observe and unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from participation and bring such to the attention of the nearest official immediately; and
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS the Bruce Sims Golf School, their officers, directors, officials, agents, owners and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for activity ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH OR LOSS OR DAMAGE TO PERSON OR PROPERTY, regarding my child and/or arising from his/her activities, WHETHER ARISING FROM NEGLIGENCE OF THE RELEASEES OR OTHERWISE, except for the willful misconduct, or otherwise to the fullest extent of the law.

I HAVE READ THIS RELEASE OF LIABILITY FORM AND FULLY UNDERSTAND THEIR TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_ / \_\_ / \_\_

# **Bruce Sims Golf School**

## **SEXUAL HARASSMENT POLICY**

Bruce Sims Golf School is committed to providing a learning environment that is free of discriminatory intimidation. The goal for every person, working on behalf of Bruce Sims Golf School, (paid or Volunteer) is to provide students with appropriate guidance, understanding, and friendship while maintaining a standard of professionalism and conduct within accepted standards.

AS a guideline for coaches, trainers, parents, and students in their relationships, let it be understood that first, the exploitation of supervisory authority to sexually harass either students or coaches is wrong and unacceptable and second, sexual harassment of one student by another is also considered unacceptable, reprehensible, and wrong.

Actions which constitute sexual harassment are, unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a when they are **(1) PART OF THE CLASS ENVIROMENT, and (2) SUBMISSION TO OR REJECTION OF SUCH CONDUCT IS USED AS A BASIS FOR EVALUATION, AND (3) SUCH CONDUCT CREATES AN INTIMIDATION, HOSTILE, OR OFFENSIVE LEARNING ENVIROMENT.**

Our policy also underscores our belief that no sexual, intimate, or extremely personal relationship should exist between coach and student.

Staff members are not allowed to contact students with any form of social media such as **text, email, etc. while in class.**

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**I HAVE READ AND UNDERSTAND THE SEXUAL HARASSMENT PLOICY, AND THE RULES OF BRUCE SIMS GOLF SCHOOL.**

Name Printed: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_/\_\_/\_\_\_\_

# Bruce Sims Golf School

## Photo Release Form

For Good and valuable consideration, the receipt of which is hereby acknowledged, I, \_\_\_\_\_, hereby grant, Bruce Sims Golf School permission to use my likeness in a photograph in any and all of its publications, including but not limited to all of Bruce Sims Golf School's, printed and digital publications. I understand and agree that photograph using my likeness will become property of Bruce Sims Golf School and will not be returned.

I acknowledge that since my participation with Bruce Sims Golf School is voluntary, I will receive no financial compensation.

I hereby irrevocably authorize, Bruce Sims Golf School to edit, alter, copy, exhibit, publish, or distribute this photo for purposes of publicizing Bruce Golf School's programs, or for any other related, lawful purpose. In addition, I waive the right to inspect or approve the finished product, including a written, or an electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph.

I here by hold, harmless and release and forever discharge Bruce Sims, Golf School from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have my reason of this authorization.

Printed name \_\_\_\_\_ Date:

Signature \_\_\_\_\_

\_\_\_\_\_  
Signature of guardian, if under 18 years of age

# **Bruce Sims Golf School**

## **Recurring Credit Card Payment Authorization**

You authorize regularly scheduled charges to your credit card. You will be charged the amount indicated below each billing period. A receipt for each payment will be provided to you at the email address listed below **and** the charge will appear on your credit card statement. You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

I, \_\_\_\_\_, authorize Bruce Sims Golf School to charge my  
(Cardholder's Name)

Credit Card below for the services and at rates indicated.

**(This Section to be completed by Bruce Sims Golf School before signing)**

Student Name: \_\_\_\_\_ New Student: \_\_\_ Returning Student: \_\_\_

\$100.00 One time for non-refundable new student administration fee

\$160.00 each month for **Level 1**

\$275.00 When promoted to **Level 2** and each month thereafter

**Credit Card Details: (please print clearly)**

Cardholder Name: \_\_\_\_\_ Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_/\_\_\_/\_\_\_ Zip Code: \_\_\_\_\_ CVV Code: \_\_\_\_\_ Billing Address: \_\_\_\_\_

\_\_\_\_\_  
City, State, Zip

Phone # \_\_\_-\_\_\_-\_\_\_ Email address: \_\_\_\_\_

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Bruce Sims Golf School in writing **of** any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend *or* holiday, I understand that the payments may be executed on the next business day. I acknowledge that the origination of Credit Card transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this Credit Card and **will** not dispute these scheduled transactions; so long as the transactions correspond to the terms indicated in this authorization form.

CARD HOLDER SIGNATURE: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_