

Geoffrey has been a member of the Professional Golfers Association for the past 35 years .He is entering his 11th year as Head Professional at the Facility. Geoffrey received the 1999 New Hampshire Chapter Junior Golf promoter of the Year award. Geoffrey was the Head Teaching Professional for the "Swings the Thing" Golf Schools for seven years where he operated junior golf schools at Shawnee C.C. in the Pocono Mountains and at Orange Lake C.C. in Orlando, Fl. He has done long and short-term instruction in the USA and overseas. Geoffrey is entering his tenth year as Head Professional at CSHGC. He has held Head Professional positions at Nippo Lake G.C. for nine years, then Candia Woods Golf Links for 9 years. He has conducted junior camps, which included the national program Hook a Kid on Golf, YMCA of Strafford County and Introduction to Golf for a number of school programs and school golf teams. Geoffrey also was the head golf coach for the University of NH Woman's golf team for three years.

If you wish to enroll, please send a full payment with the completed form including parents or guardian's signature at least two weeks prior to the desired session you wish to attend.

Cost per camp is \$100.00
Bring More Save More Program

- Enroll 2 students: \$80.00 each
 - Enroll 3 students: \$60.00 each
 - Enroll 4 or more students: \$50.00 each
- Minimum of 6 students required per camp.**
Maximum of 12 students per series.
Cost per camp is \$100.00

Equipment will be available for use and sale.
 Class size limited, **10 - 16 years old**

Sessions	Days	Time
June 20 - 23	Tue. - Thurs.	9am - 11am
June 27 - 29	Tue. - Thurs.	9am - 11am
July 11 - 13	Tue. - Thurs.	9am - 11am
July 18 - 20	Tue. - Thurs.	9am - 11am

Enrollment Form

NAME (LAST) _____
 NAME(FIRST) _____
 ADDRESS: _____
 CITY: _____
 STATE: _____ ZIP: _____
 Hm. Ph #: _____
 e-mail: _____
 AGE: _____ GRADE IN SCHOOL: _____
 PARENT /GUARDIAN
 FATHER: _____
 MOTHER: _____
 DAY TIME Ph. # _____

DO YOU HAVE ANY MEDICAL PROBLEMS WHICH WOULD REQUIRE SPECIAL ATTENTION?
IF YES, PLEASE EXPLAIN

If medical attention is required for illness or injury while attending camp,
 I _____ give permission for such care.

I approve of _____ participating in the Campbell's Scottish Highland Golf Course Junior golf camps and certify that he/she is in good health and able to participate in all camp activities.

What would you like to achieve as a goal during the golf camp?

HOW DO YOU RATE YOURSELF AS A GOLFER?

Beginner Intermediate
 Right handed Left-handed

DO YOU HAVE CLUBS? YES NO
If you do not have clubs we will supply them,

Please fill-in session date you wish to attend
DATE: _____

Sessions	Days	Time
June 20 - 22	Tue. - Thurs.	9am - 11am
June 27 - 29	Tue. - Thurs.	9am - 11am
July 11 - 13	Tue. - Thurs.	9am - 11am
July 18 - 20	Tue. - Thurs.	9am - 11am

Please return completed enrollment form with full payment two weeks prior to the first day of camp.

Geoffrey Williams
 Campbell's Scottish Highlands G.C.
 79 Brady Avenue
 Salem, NH 03079

Check payable to: C.S.H.G.C.
 Credit Cards – Amx, VISA/MC & Discover
 accepted at Club (Golf Shop)
 Or
 The Range (Golf Shop)
 Cell: 603-833-0084
 Golf Shop: 603-894-4653 ext. 13
 The Range 603 896-6500
 Voice Mail: 603-894-4653 ext. 39