

# 2024 Golf Season: Spring Clinics

Combined Beginner & Intermediate Levels - COED  
Class Size ~6:1 Student / Instructor Ratio



Group clinics are a great way to learn to play golf, keep up with your game and have fun too. We have designed our clinic series for the beginner golfer as well as the intermediate player who wants to improve their swing mechanics this golf season. By working on the most important parts of the swing, it can improve how well you make contact with the ball and how consistent you are when you play. You will hit the ball better, farther, and more consistently and ultimately have more fun when you get out on the course. Let us show you how!

## Spring Clinic Schedule

- The 2024 Spring Series will run for 6 weeks beginning April 6<sup>th</sup>.
- Students should enroll in the program time that best suits their schedule for the full series or call to create a group of your own with 4 or more students at a time that works for you.
- The Junior and Little Linkster Clinic programs are designed as a 6-week series with lesson topics taught in sequence.
- All Junior/ Little Linkster clinics are 1 hour in length.
- Classes will take place at the Applecross Learning Center located up on the driving range.
- Class location and times are subject to change as weather conditions change. You will be notified via text of any changes so be sure to always book your classes on-line through Smarter Lessons found on our website.
- There are no makeups for a missed class during the 6-week series unless class is cancelled due to weather. The price for the six-week series includes one FREE class.

**Spring Series Dates: 4/6, 4/13, 4/20, 4/27, 5/4, 5/11**

### Little Linkster (6) Week Series:

- **Saturdays**
  - **Ages 4~6: 9:15 - 10:15am**

### Junior Clinic (6) Week Series:

- **Saturdays**
  - **Ages 7~9: 10:15 - 11:15am**
  - **Ages 10~12: 11:15am - 12:15pm**
  - **Ages 13+: 12:15 - 1:15pm**

- To register, Step 1: Students must register for clinics by submitting the following registration form with payment by the start of the program series or bring them to each individual class.
  - Submit your form and payment in advance by dropping off at the Applecross pro-shop, mail to the address at the bottom of the form or bring with you to class.
    - You must PREPAY by the first class of the series to receive the full discounted program rates. You may not pay for classes attended at the end of a series.
    - If you are unable to attend at least 5 classes in the 6-week series, you will pay the individual class rate.
      - You may submit one registration form and prepay for up to 4 classes noting the date(s) your child will attend or you must bring a registration form with payment to each individual class your child attends.
- To register, Step 2: Schedule all your classes online through Smarter Lessons.
  - To view the full program calendar and schedule your classes, please create an account on Smarter Lessons by clicking on the "Book Now" button on our website in the yellow highlighted registration sections.
    - You must create a separate account for each student.
    - Once complete, you will add the student's name to the class rosters for the date(s) they will attend.
- The more frequently a student attends class and practices what they learn, the greater opportunity there is to improve.

Applecross Country Club is a private golf facility and requires proper golf attire to be worn on the course, on the range, and at the Learning Center while participating in all golf activities. A collared shirt tucked in for men and boys is recommended. Sneakers are acceptable footwear. Absolutely NO T-shirts, tank tops, gym shorts, jeans or cargo pants/ shorts are permitted on the course or practice facilities.

**For complete information on programs and how to register for the 2024 Season, visit our website:  
[www.ericmaccluegolf.com](http://www.ericmaccluegolf.com)**

# 2024 Junior Golf Program Registration Form

for the **Applecross Golf Academy** featuring **Eric MacCluen**

Please PRINT clearly. Complete each section, and be sure to initial, SIGN & DATE participation waiver!



**Student Name\*:** \_\_\_\_\_ **Junior/ Little Linkster Age** \_\_\_\_\_

Complete one form per student for each Jr./ Linkster (6) week Clinic Series or complete one form per student for each individual clinic you attend.

**Street** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Parent 1 Cell #** \_\_\_\_\_ **Parent 2 Cell #** \_\_\_\_\_ **Email** \_\_\_\_\_

**Do you need to borrow clubs? Yes / No**      **RH / LH**      **Height in Inches** \_\_\_\_\_”

## Spring Golf Clinics

**Linkster Clinics:**     **Spring 6-week Series > Age Group: 4-6y**      **Day/Time: Saturdays @ 9:15 – 10:15am**  
 Individual Clinic Date(s): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**Junior Clinics:**     **Spring 6-week Series > Age Group: 7-9y**      **Day/Time: Saturdays @ 10:15 – 11:15am**  
 Individual Clinic Date(s): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**Spring 6-week Series > Age Group: 10-12y**      **Day/Time: Saturdays @ 11:15am – 12:15pm**  
 Individual Clinic Date(s): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**Spring 6-week Series > Age Group: 13+y**      **Day/Time: Saturdays @ 12:15 – 1:15pm**  
 Individual Clinic Date(s): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**Cash/ check payments:** Provide cash or check information below. All checks returned due to insufficient funds will be assessed a \$30 returned check fee along with the original amount, due immediately.

**Little Linkster 6-week Clinic Series:**     **\$175** (\$35 savings = 1 FREE Clinic)    or     Individual Clinic(s) **\$35 x** \_\_\_\_\_

**Junior 6-week Clinic Series:**             **\$200** (\$40 savings = 1 FREE Clinic)    or     Individual Clinic(s) **\$40 x** \_\_\_\_\_

**Cash,**     **Check No.:** \_\_\_\_\_ **(Check payable to Eric MacCluen Golf LLC)**    **Cash/Check Amount:** \_\_\_\_\_

\*Students must submit a completed registration form & pay in full by the start of each (6) week clinic series to take advantage of the discounted program rates. If payment is not received by the first class, then each class attended prior to receiving payment will be charged the single clinic rate of \$40 for Jrs. and \$35 for Linksters. The prorated per class amounts of \$33 Jrs. and \$29 Linksters will apply toward remaining classes from the date of payment until the end of the clinic series. Series content will be taught in succession, therefore, attending individual classes is discouraged. Series rates are per person and may not be split between siblings. There are no refunds or carry over to future series for missed classes due to the savings offered. NO exceptions!

### Applecross Golf Program Release & Waiver of Liability, Assumption of Risk, Indemnity & Parental Consent Agreement:

1) I hereby release and discharge Eric MacCluen Golf (“EMG”) and Applecross Country Club (“ACC”), their agents, employees, staff members, directors and officers from any claims, responsibilities, or liabilities for injuries as a result of my child’s participation as a player or spectator in programs and activities at ACC. I fully understand that: these activities involve risks and dangers of serious bodily injury or death, (“Risks”); these Risks and dangers may be caused by my own actions or inaction’s, the actions or inaction’s of others participating in the activity, the condition in which the activity takes place, or the negligence of the “Releasee’s named below; there may be other risk and social and economic losses either not known to me or readily or foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation or that of the minor in the Activity. I authorize EMG and ACC, their agents, employees, staff members, directors, and officers to take whatever action is necessary, in their best judgment, in an emergency and I hereby release discharge EMG and ACC, their agents, employees, staff members, directors and officers from any responsibility or liability related thereto. \* **Initial >** \_\_\_\_\_

2) I hereby grant EMG and ACC permission to use my child’s name, picture, or likeness in any printed media or any form of advertisement. I fully renounce any and all claims upon EMG and ACC for reimbursement for use of this material. \* **Initial >** \_\_\_\_\_

**I have read & understand all information presented in the Applecross Golf Program Participation Release & Waiver.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\* You must agree to all terms & conditions set forth in the participation release & waiver agreement to participate in Applecross Golf Programs.

Please drop off registration forms with payment to the Applecross pro-shop in an envelope marked "Jr./ Linkster Golf Clinics, Attn: Eric MacCluen", bring directly to class or mail to: Eric MacCluen Golf LLC, 824 Tremont Drive, Downingtown, PA 19335.