

Pioneer Junior Golf Tour Application

APPLICATION FORM - complete both sides
ONE FORM PER PARTICIPANT



Applicants for the Pioneer Tour *must* have a working knowledge of the rules, understand the etiquette of the game and be able to consistently break 60 for nine holes.

Participant's Name: _____
 Date of Birth: _____ Age on August 1, 2024: _____
ALL applicants must supply COPY OF BIRTH CERTIFICATE even if they participated last year.
 Category (check one) [Age on AUGUST 1 determines division]:

- Div IV - boys & girls 9-12**(must have qualified first in Q-Tour)
- Div III - girls ages 13-18
- Div II - boys ages 13-15
- Div I - boys ages 16-18

Player Experience: _____
 Handicap: _____
 GHIN #: _____
 Last 5 scores: _____
 Dates: _____

Date	Tournament	Location	Player	Volunteer
Monday, July 1	Masters	Valley Brook GC, River Vale	<input type="checkbox"/>	<input type="checkbox"/>
Monday, July 8	The Heritage	Rockleigh GC, Rockleigh	<input type="checkbox"/>	<input type="checkbox"/>
Monday, July 15	The Memorial	Darlington GC, Mahwah	<input type="checkbox"/>	<input type="checkbox"/>
Monday, July 22	The Open	Overpeck GC, Teaneck	<input type="checkbox"/>	<input type="checkbox"/>
Monday, July 29	The PGA	Soldier Hill GC, Emerson	<input type="checkbox"/>	<input type="checkbox"/>
Monday, August 5	Players Championship	Rockleigh GC, Rockleigh	<input type="checkbox"/>	<input type="checkbox"/>
<i>Qualifying Rounds:</i>				
Monday, August 12	Yaz Consalvo	<i>Qualifying Round</i> Valley Brook GC, River Vale	<input type="checkbox"/>	<input type="checkbox"/>
<i>Match Play:</i> Tues. 13, Wed. 14		<i>Match Play for Qualifiers</i>		
Monday, August 19	Tour Championship	Soldier Hill Golf Course	Pay on site if qualified	<input type="checkbox"/>

Application Fee					\$ 20.00
Tournament Boxes Checked	+	_____	x	\$ 15.00	=
Total Amount Enclosed:			Total	\$	_____

Mail completed application, copy of birth certificate, and check (payable to BC Dept. of Parks) to:
 BC Golf Administration Office
 Soldier Hill Golf Course
 99 Palisade Avenue
 Emerson, NJ 07630
 201-336-7259

VOLUNTEERS

Volunteers are important to the success of The Pioneer Tour. The Department of Parks has limited staff to run the program. Help is needed during registration, scoring and during play to walk with the Division IV participants. Prior golf experience is a plus but is not necessary. Staff members will give detailed instruction to the volunteers prior to each event. Please participate.

Application Form

COMPLETE BOTH SIDES

Complete only one form per child. Participants may apply for only one program.
Photo copies of the application are acceptable.

ALL applicants must supply COPY OF BIRTH CERTIFICATE even if they participated last year.

Participant's Last Name: _____

Participant's First Name: _____

Home Address: _____

City/State/Zip: _____

Home Phone: () _____ Male Female

Birth date: ___/___/___ Age on August 1, 2024 _____

Copy of birth certificate required.

Parent's / Guardian's Name: _____

E-mail _____

ALL NOTICES OR UPDATES WILL BE EMAILED

In the event of an emergency contact:

Name: _____ Phone () _____

Name: _____ Phone () _____

I understand The Pioneer Tour regulations and agree that this entry is subject to the approval or rejection at any time by The Pioneer Tour Committee at their discretion. I understand that the use of alcohol, tobacco, drugs or misconduct may disqualify me.

Signature of Applicant: _____ Date: _____

APPROVAL AND CONSENT BY PARENT OR GUARDIAN: As a parent or guardian of the applicant, I hereby certify the facts as stated in this entry form and attest that I am familiar with his/her plans to participate and that he/she does so with my approval. I further certify in the event that emergency medical care needs to be administered to the above named applicant, and the below mentioned person cannot be contacted, the required parental consent may be given by an authorized member of the The Pioneer Tour Committee. INDEMNIFICATION AGREEMENT AND RELEASE: In consideration of the above named participant I hereby agree to indemnify, defend and hold harmless the Bergen County Department of Parks its employees, volunteers and its golf facilities, The Pioneer Tour, and its committee members from any liability or claim or action for damages arising from my child's participation in this program regardless of the cause including the negligence of the above named entities. I understand the risks inherent in the game of golf and agree to assume the risk to my child or possible injury and to assume liability for my child's conduct.

Signature of Parent or Guardian: _____ Date: _____

**WE NEED
VOLUNTEERS
for The Q Tour and
The Pioneer Tour (Div. IV)**

Volunteers are a critical part of the Pioneer Program. Some of the duties include walking with groups, helping with registration or overseeing activities. See reverse side to indicate when available and then sign in at the tournament.