

Front 9 Tour
Hayden Hough Junior Memorial
Non – Tour Member Registration Form
PLAYER INFO (each player must have their own form and all fields are required)



Player's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Player DOB: _____ Age: _____ Gender: _____ Avg. Score: _____

Emergency Contact: _____

Contact Phone #: H _____ C _____ W _____

Parent/Family Email (for information and updates): _____

PARENTS CONSENT— Forms without signed Parental Consent will not be processed
*I certify that the above information is true and correct to the best of my knowledge. The FRONT 9 TOUR and/or any tour site has my authorization to obtain necessary medical and/or surgical treatment in the case of illness, accident or any emergency situation that may arise if I am unable to be reached at the time of such emergency. I agree that in **no event** will the FRONT 9 TOUR and/or any tour site be held liable for **any** injuries, accidents or losses suffered by my child while participating in any tour and that the FRONT 9 TOUR and/or any tour site is here by **released from any liability**. *Any pictures taken by FRONT 9 TOUR or given to FRONT 9 TOUR shall be used at FRONT 9 TOUR's discretion for promotional or advertising purposes.*

Parent/Guardian Signature: _____
(Signatures only please)

Referred By: _____ Date: _____

Please select the correct item(s)

Hayden Hough Junior Memorial Invitational

- USSSA Membership exemption: LJGT Membership Exemption:

13 to 18 Division: \$175

10 to 12 Division: \$125

Total of Check or Money Order: \$ _____

Please mail this form **FULLY COMPLETED** with your Check or Money Order made payable to:

Front 9 Tour
P.O. Box 44554
Shreveport, LA 71134
Fax # (877)781-2072