



**JUNIOR
GOLF CAMPS
SUMMER 2026**

DATES: (CIRCLE ONE)

SESSION #1 JULY 13-16
SESSION #3 JULY 27-30
SESSION #5 AUGUST 10-13

SESSION #2 JULY 20-23
SESSION #4 AUGUST 3-6
SESSION #6 AUGUST 17-20

TIME: **9:30 AM – 12:00 PM** (Monday through Thursday)
Mondays, Tuesdays, & Wednesdays, camps will be at Mill Pond GC
Thursday's camp will be held at Rolling Oaks Golf Course from **8am to 10am**

INCLUDES: Students will learn the fundamentals of golf including: grip, stance, posture, alignment, full swing, short game, putting, rules and proper etiquette, sportsmanship, course management, on course instruction and prizes. On the last day of camp all students will go on the course for a 9-hole Team Scramble.

BREAKS: Juniors will have 2 break times per day. They should bring appropriate snacks with them for each day. (Students will be supervised during their breaks)

REGISTRATION: **This camp is intended for school aged children 12 – 16 years old.** All juniors that are interested in participating in the JUNIOR GOLF CAMP at MILL POND GOLF COURSE must complete the registration form below and return it to the Pro Shop at Mill Pond Golf Course as soon as possible. Class size is limited 8 juniors per session. This is a very popular junior program and classes always fill up quickly.

FULL payment is required at time of registration and will guarantee a spot in camp.

PRICE: **\$350.00 for Town of Brookhaven Residents, PER JUNIOR**
\$375.00 for non-residents, PER JUNIOR
Multiple Week Discounts available at \$25.00 off for additional weeks.

JUNIOR CAMP REGISTRATION FORM

NAME: _____ AGE: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ HOME PHONE: _____

CELL PHONE _____

EMERGENCY CONTACT _____ PHONE # _____

1. DOES JUNIOR HAVE ANY RESTRICTIONS/ALLERGIES? _____

2. DOES JUNIOR REQUIRE ANY MEDICATIONS? _____

3. SESSION(S) OF CHOICE _____ ALTERNATE _____

4. METHOD OF PAYMENT CASH: _____ CHECK # _____

CREDIT CARD: WE ACCEPT VISA, MASTERCARD, DISCOVER & AMEX

ACCOUNT # _____ EXP. DATE ___ / ___

Please Make Checks Payable to Mill Pond Golf Course

I hereby release the staff, camp management of any liability or illness incurred while at the camp. I will be financially responsible for any medical attention received at camp or from any injury received at camp.

PARENTS SIGNATURE: _____ E MAIL ADDRESS _____

Mail Checks to:

Mill Pond Golf Course
Attn: Mike Zguris
300 Mill Road
Medford, New York 11763

(CIRCLE ONE)

SESSION #1 JULY 13-16

SESSION #2 JULY 20-24

SESSION #3 JULY 27-30

SESSION #4 AUGUST 3-6

SESSION #5 AUGUST 10-13

SESSION #6 AUGUST 17-20

(OFFICE USE ONLY)