2022-2023 NEXT LEVEL

APPLICATION FORM





PERSONAL INFORMATION Parent/Guardian Name: Parent/Guardian Email: Contact's Phone #: **Player Info Player Name:** Date of Birth: D D **Years of Experience: Player Goals: Contact for more information:** Alex Balog, PGA Date of **Director of Golf Operations** Alex@Whitetailridgegc.com signature: 630-882-8988 Signature Of Applicant (For office use only) Initial form of Payment: Tommy Falcone, PGA Apprentice **Assistant Golf Professional** Tommy@Whitetailridgegc.com

630-882-8988 x1013

CASH

CHECK

CREDIT