



A Proven Training Ground
for Junior Golfers

Application to participate in Future Champions Golf Academy

JUNIOR ELITE MONTHLY PROGRAM

PLAYERS NAME: _____

AGE: _____ PHONE # _____

EMAIL: _____ PARENTS NAMES: _____

GOALS FOR GOLF:

1. _____

2. _____

3. _____

CURRENT SCHOOL: _____ GRADE: _____

TOURNAMENT RESUME (If applicable)

Tour	Event Name	Course	Tees	Score

Rate Your Current Golf (YOUR OWN OPINION – 1 is bad, 5 is great)

Ball Striking	1	2	3	4	5
Short Putting	1	2	3	4	5
Lag Putting	1	2	3	4	5
Chipping	1	2	3	4	5
Pitching	1	2	3	4	5
Mental Game	1	2	3	4	5
Practice Plan	1	2	3	4	5
Dedication	1	2	3	4	5
Strength / Fitness	1	2	3	4	5

Thank You! Please email the completed form to chris@futurechampionsgolf.com

