



Training U Participant Form

Wednesday, March 10, 2021 * 9:30 a.m. – 3:30 p.m. * Sawgrass Marriott, Ponte Vedra Beach, Fla.

Nominated By _____ Title _____

PARTICIPANT INFORMATION

Name _____ Age _____ Gender ☐ Male ☐ Female
School _____ Grade _____ GPA _____
Email _____ Phone _____
Ethnicity: ☐ Black or African American ☐ Asian ☐ Caucasian ☐ Latino or Hispanic
☐ Native-American ☐ Pacific Islander ☐ Multi-Racial ☐ Decline to respond

EXTRACURRICULAR ACTIVITIES

List sports programs, extracurricular activities _____

Honors/Awards (Include both academic and/or athletic recognitions) _____

POSTSECONDARY PLANS & INTERESTS

Upon graduation, I plan to ☐ Enroll in college ☐ Enroll in trade school ☐ Enter the military ☐ Enter the workforce
☐ Undecided

Career Goal/Aspirations _____

Allergies _____ Dietary Restrictions _____

How will you be transported to Training U? ☐ Personal vehicle ☐ Dropoff ☐ Carpool ☐ Need transportation

PARENT & EMERGENCY CONTACT INFORMATION

Parent or Guardian Name _____ Relationship _____

Parent or Guardian Email Address _____

Street Address _____ City _____ State _____ Zip _____

Home Phone (_____) _____ Work Phone (_____) _____

Emergency Contact (if different) _____ Phone (_____) _____



Release of Liability & Acknowledgement of Risk

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Medical Consent

The parent/guardian below hereby consents to all emergency medical care for the minor listed below which may be deemed advisable by treating physicians, the intention hereby being to grant authority to administer and perform all examinations, treatments, and procedures which may be deemed necessary for patient care.

Media Release

I hereby assign, authorize, give and grant to PGATOUR, Inc., together with its affiliates, successors, assigns, sponsors, licensees and/or sublicensees (collectively, the “Releasees”) the unrestricted right and permission to copyright, exploit, use, re-use, publish, republish, and/or sublicense any and all photographs, video recordings, and interviews captured during the below named minor’s participation in Training U, in whole or in part, whether composite or distorted in character or form, in color or black and white, made through any media now or hereafter known for illustration, art, promotion and/or advertising of Training U.

Waiver of Liability

I agree that the below named minor’s participation in Training U is voluntary. I do hereby release and discharge each of PGA TOUR, Inc., its affiliates, and their respective officers, directors, employees, staff and agents from any and all claims the below named minor may suffer or sustain, directly or indirectly, in connection with participation in or related to Training U activities. Also, I give permission for the below named minor’s participation in all activities associated with Training U and to travel in any vehicles provided by PGA TOUR, Inc., including without limitation any independent, third party contractor engaged by PGA TOUR, Inc. I understand that any and all transportation provided in connection with Training U will be provided by adults. I further understand that such transportation may be provided by one or more independent, third party contractors and not by PGA TOUR, Inc.

COVID-19 Acknowledgment

As the parent/guardian of the minor listed below, I recognize that such minor’s participation in Training U includes in-person interactions with other individuals. Further, I acknowledge COVID-19 is extremely contagious and that despite the measures PGA TOUR, Inc. has implemented during Training U to help mitigate the risk of transmission, the elimination of risk of exposure and infection to COVID-19 is not currently possible. By allowing the below named minor to participate in Training U, I agree to accept and assume any and all risks and danger arising out of the attendance at and participation in Training U associated with COVID-19.

I hereby warrant that I am the parent or legal guardian of the minor named below and I have the authority to execute this Release of Liability & Acknowledgement of Risk on his or her behalf. This Release of Liability & Acknowledgement of Risk shall be binding upon me, the below named minor and our respective assigns, heirs and legal representatives.

Minor’s Name _____

Parent/Guardian Name _____

Parent/Guardian Signature _____ **Date** _____