

2008 JUNIOR GOLF ACADEMY

INSTRUCTION INCLUDES:

- Putting
- Chipping
- Bunker Play
- Full Swing
- Rules and Etiquette
- Course Management

FOR ADDITIONAL INFORMATION:

Please contact Tim Grogan
(414) 288-5156 or
tim.grogan@marquette.edu
or visit

GOMARQUETTE.COM
(Click on Summer Camps)



**JUNIOR GOLF
ACADEMY**

SCHEDULE

EAST LOCATION:
Missing Links Golf Club
Mequon

June 18-20
June 23-25

WEST LOCATION:
Silver Spring Country Club
Menomonee Falls

June 24-26
July 9-11

The Academy runs from
9:00 am to 4:00 pm daily.

A TYPICAL ACADEMY DAY

9:00 am - 12:00 pm	Instructional Stations
12:00 pm - 1:00 pm	Lunch at Golf Course
1:00 pm - 3:45 pm	Play on Course
4:00 pm	Pick-up

Staff Ratio is 6 to 1.

June 18-20
June 23-25
June 24-26
July 9-11

Boys & Girls 7-17
All Abilities Welcome



**JUNIOR GOLF
ACADEMY**

Academy Director

TIM GROGAN

Head Golf Coach,
Marquette University

P.G.A. Professional



TIM GROGAN

Head Golf Coach,
Marquette University



The summer golf season is fast approaching! You are invited to join us for one of our three-day junior golf programs. The Academy welcomes players of all abilities, ranging from limited experience to tournament players looking to go to the next level. The Academy is designed to evaluate, instruct, and improve the individual skills of each player. My staff of PGA Professionals and Marquette University golf team members are committed to providing an exciting three full days of golf. Our enthusiastic highly qualified staff coupled with some of Milwaukee's top golf facilities East Location (Missing Links, Fire Ridge, Mee-Kwon) and West Location (Silver Spring Country Club) will make a great golf experience. We look forward to seeing you this summer!

ACADEMY DIRECTOR

Director Tim Grogan is in his seventeenth year as the Head Golf Coach at Marquette University. Coach Grogan has recruited and instructed many of Wisconsin's top junior golfers. Under his direction, the golf team has had numerous individual and team successes. Coached team to 2008 Big East Conference Championship and guided team to first NCAA appearance in 2008. Voted Coach of the Year in 2006 and 2008 by his coaching peers. Grogan has also been teaching juniors of all skill levels and age ranges at Missing Links Golf Club since 1995 and was recognized as the "2005 and 2006 Teacher of the Year" by Golf Course Owners of Wisconsin. A PGA Member since 1997. Tim has earned the status as a PGA Certified Professional in Instruction (one of less than 100 in the PGA of America). In addition, he has served as the Director of Nike Junior Golf Camps in Wisconsin for the past Twelve years. As a player, Grogan competed in the 1996 Greater Milwaukee Open, has had several top finishes in the Wisconsin State Open, and played collegiate golf at UNLV.

ACADEMY STAFF



The Academy is staffed by highly qualified PGA Professionals, Marquette University players and other top collegiate golfers.

ACADEMY COST: 3 Day - \$285

ACADEMY PACKAGE

- 18 hour Golf Program
- Official Academy Golf Hat
- Official Academy T-shirt
- Video Analysis (take-home video)
- Academy Instructional Booklet
- Comprehensive Individual Evaluation Form



2008 JUNIOR GOLF ACADEMY

Camper's Name - First _____ Last _____

Street _____ City _____ State _____ Zip _____

E-mail _____ Telephone _____

Date of Birth _____ Age _____ Sex _____

Date: June 18-20 June 23-25
 June 24-26 July 9-11

SKILL LEVEL: Beginner Intermediate Advanced

Person Paying _____

Address (if different) _____

Telephone (home) _____

Telephone (business) _____

Golf Professional or Golf Retailer who referred the Academy: _____

Checks payable to: Marquette Junior Golf Academy
1532 W. Clybourn Street
Milwaukee, WI 53223

HEALTH INFORMATION

Please note if the camper should be restricted from any activity: _____

Will the camper be taking medication during the camp?
 Yes No

If Yes, please indicate the name of the drug and the dosage. _____

Please identify any medical condition/allergies which would require special attention: _____

I hereby certify the name camper is physically able to participate in the Golf Academy and that I know of no restrictions, physical impairments, or any other facts, which in any manner limit his/her participation in such a program.

Physician's Name _____

Telephone () _____

Insurance Information Carrier Name: _____

Policy Number: _____

I, the parent of _____, give permission for my child to receive emergency medical or surgical treatment and hospitalization if necessary. I understand that every attempt will be made to contact me, or the named person named below, before taking this action. I hereby waive and release the Staff, Academy Management and Sponsors from any liability for any injury or illness incurred while at the Academy. I understand that there is a risk of injury to my child as a result of Academy activities, and knowingly and voluntarily assume all risk of such injury. I will be financially responsible for any medical attention needed during the Academy or resulting from an injury received at the Academy.

Home Phone () _____

Work Phone () _____

Signature _____ Date _____

Person to contact in the event I cannot be reached: _____

Phone () _____