

# La Grange Country Club Caddie Position Application

Name: \_\_\_\_\_ Weight: \_\_\_\_\_ Height: \_\_\_\_\_  
(Last, First)

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School: \_\_\_\_\_ Year in School: FR SO JR SR

Parent Name(s): \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Parent Work Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Do you have any special needs or require any special attention? Yes No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

Do you play golf? Yes No If yes, what is your average score on 18 holes? \_\_\_\_\_

Why do you want to be a Caddie? \_\_\_\_\_  
\_\_\_\_\_

What do you expect will be most rewarding about being a Caddie? \_\_\_\_\_  
\_\_\_\_\_

How many days per week do you expect you will be able to commit to the program? \_\_\_\_\_  
\_\_\_\_\_

Are there any periods in which you are not available to Caddie? \_\_\_\_\_  
\_\_\_\_\_

**All caddie applications must be returned with a photocopy of the applicants birth or baptismal certificate.**

**Deadline date for applications – April 2, 2010**

I have read and understand the LGCC Caddie Rules & Regulations. I will conduct myself in accordance with these standards and will act with respect towards the club members, employees, other Caddies and club property.

\_\_\_\_\_  
Caddie Signature

\_\_\_\_\_  
Date

I hereby give my consent for my son/daughter to caddie at the La Grange Country Club and understand that I will be responsible for his/her conduct at the club. I further understand the club will not be responsible in damages for injuries to any Caddie.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

*Please submit your application via mail or drop off at the main office:*

*La Grange Country Club*

*Att: Golf Shop*

*620 S. Brainard Ave*

*La Grange, IL 60525*