



STATEMENT OF YOUTH CERTIFICATION

I, \_\_\_\_\_, hereby state that \_\_\_\_\_  
(PROFESSIONAL'S NAME) (JUNIOR'S NAME)

has participated in the junior golf program at \_\_\_\_\_ for the past  
(GOLF COURSE NAME)

\_\_\_\_\_ years. This junior has a basic understanding of rules, safety, etiquette, and awareness  
(# OF YEARS)

of others on the golf course.

Sincerely,

\_\_\_\_\_  
(SIGN YOUR NAME HERE)

Please have the junior golfer bring this form with him/her to the scheduled Certification Testing appointment or mail/email/fax to:

Cantigny Golf  
Attn: Emily Burns  
27w270 Mack Road  
Wheaton, IL 60189

Email: [eburns@cantigny.org](mailto:eburns@cantigny.org)

Fax: 630.260.8285