



2025 YOUTH GOLF PROGRAM

First Tee—South Dakota at Elmwood GC

About First Tee—South Dakota

First Tee—South Dakota improves the lives of young people by providing educational programs and learning environments that build character, instill life enhancing values, and promote healthy choices through the game of golf. First Tee Programming experience enables participants to learn valuable lessons about the importance of maintaining a positive attitude; how to make decisions by thinking about the possible consequences and how to define and set goals from the golf course to everyday life. Participants learn about themselves and others through a range of experiences enhancing their golf skills as well as their fundamental values for life. As their opportunities on the golf course expand, so do the opportunities for their future.

First Tee students will register and be placed in a program based on their age. The age groupings will be 5-7, 7-9, 10-11, 12-13, and 14+. Participants will continue to progress through the program based on their age. First Tee provides tremendous opportunities for young people to achieve success both in golf and in life. We are building game changers!

You can learn more about the First Tee Experience at www.firsttee.org or at our chapter website www.firstteesouthdakota.org.

No young person will be turned away from the First Tee programs because of an inability to pay.

Volunteers are always needed—you don't need to play golf to be an effective role model or volunteer for our program.

Additional Information

First Tee—South Dakota at Elmwood Golf Course Participant Benefits

- * Participants can play Kuehn Park and East 9 at Elmwood GC Friday, Saturday, and Sunday after 5:00 PM for \$8.50.
- * \$1 range tokens may be purchased during the summer program at Elmwood GC, Prairie Green GC, and Kuehn Park GC.

**FIRST TEE—SOUTH DAKOTA PARTICIPANT ID
MUST BE SHOWN TO RECEIVE BENEFITS**

**** All equipment is provided, but you may bring your own golf clubs.**

** (If you bring your own set of golf clubs please individually label EACH club with name and phone #)**

Financial assistance available

email Chantel at info@firstteesouthdakota.org

No refunds after May 26th

Mail to: First Tee—South Dakota

2604 West Russell St.—Sioux Falls—SD—57104


Make-up Days are built into the program, if your participant misses a day, they will become caught up the next class day, no additional days will be added to the program.

Online registration forms and additional information are available at www.firstteesouthdakota.org.

First Tee—South Dakota
2604 W. Russell St.
Sioux Falls, SD 57104
605-367-7092

Email: info@firstteesouthdakota.org

Website: www.firstteesouthdakota.org



ELMWOOD GOLF COURSE
Elmwood Golf Course
2604 West Russell
Sioux Falls, SD 57104
605-367-7092



PRAIRIE GREEN GOLF COURSE
Prairie Green Golf Course
600 East 69th St.
Sioux Falls, SD 57108
605-367-6076



KUEHN PARK GOLF COURSE
Kuehn Park Golf Course
2900 Kuehn Park Rd.
Sioux Falls, SD 57106
605-362-2811



Scan to register online!



Proudly
Sponsored By:



Building Game Changers

2025—New and returning participants to First Tee—South Dakota

Ages 7 to 11

When: MONDAYS—June 2, 9, 16, 23, 30, July 7, 14, 21, 28

Sessions: 8:00–9:15 a.m. or 9:30–10:45 a.m. or
11:00 a.m.–12:15 p.m. or 1:00–2:15 p.m.

When: TUESDAYS— June 3, 10, 17, 24, July 1, 8, 15, 22, 29

Sessions: 8:00–9:15 a.m. or 9:30–10:45 a.m.

Where: Elmwood Golf Course –2604 W. Russell St

Cost: **\$166**

Indicate on registration form your session preference.

Participation is limited in each session!

Our programs will be organized by the following age groups:

Ages 7–9: Elementary School

Ages 10–11: Elementary/Middle School

This will enable our coaches to create meaningful and fun content aligned to each kids' developmental level. It will bring other benefits as well, from kids bringing friends into their classes to more teens staying with First Tee longer.

Health Information

Parent / Guardian Initials _____

In the event that I cannot be reached in an emergency, I agree to accept any and all determinations of need for medical assistance and/or administration of medical attention deemed necessary by the First Tee Chapter representatives. I hereby give permission to the medical personnel selected by the First Tee Chapter representatives to secure any and all medical, hospitalization, dental, and/or surgical treatment. In the event that such medical attention is needed from a healthcare provider, all costs shall be the responsibility of the parent or guardian.

Media Release

Parent / Guardian Initials _____

I hereby give the First Tee Chapter, Headquarters Office and participating agencies permission to use film, video tape and/or photographs of the above mentioned minor for lawful promotional or informational purposes.

I, the parent/legal guardian of the above named youth, give approval for participation in the First Tee sponsored activities. I assume all risks of injury whatsoever and agree to hold harmless the First Tee Chapter and Headquarters Office from claim(s) of any nature arising from any activity, including transportation, connected with the First Tee facility or program. This hold harmless agreement includes, but is not limited to, any claim due to injury proximately resulting from negligence of the First Tee Chapter and Headquarters Office communicating information regarding my child's participation via the internet.

Emergency Contact: _____ Relationship: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____ Cell Phone (2): _____

Parent/Guardian Signature _____ **Date** _____ **Please Print Name** _____

Group Request: If you wish to be grouped with another participant please indicate so on this application. Deadline to request is May 1st. However, all requests are subject to availability based on the level of each participant and is not a guarantee. Being a part of the First Tee is about meeting new people so we wish to limit the amount of requests per individual.

FIRST TEE—SOUTH DAKOTA AT ELMWOOD GOLF COURSE

2025 REGISTRATION FORM for Monday and Tuesday Youth Program



at Elmwood Golf Course 2604 W. Russell St—Sioux Falls—SD—57104

Youth Information

Name: _____ Gender: Male _____ Female: _____ Birthdate: ____/____/____ Grade Level : _____

Phone: _____ Ethnicity: (circle) Caucasian/White, African American/Black, Hispanic/Latino, Asian, Pacific Islander,
Native American/Native Alaskan, Multi-Racial

Address: _____ City: _____ State: _____ Zip: _____

Parent/Legal Guardian: _____ Parent/Guardian Email: _____

T-Shirt Size: Youth S ___ M ___ L ___ Adult S ___ M ___ L ___ XL ___ XXL ___ 3XL ___ School Name _____

Does your Participant Need to Borrow Golf Clubs: (circle) Yes/No

*If yes, circle if they are **right** or **left** handed. What is your participant's **height**? ____ ft ____ inches

please fill out health and media release above

Session Preference: Rank 1,2,3, & 4 *you will be put in your first choice unless contacted by the First Tee*

MONDAY 8:00–9:15 ___ 9:30–10:45 ___ 11:00–12:15 ___ 1:00–2:15 ___ **TUESDAY** 8:00–9:15 ___ 9:30–10:45 ___

Cost: \$166 **Cash** ___ **Check** ___

CC # _____ **Exp. Date** _____ **CVV** _____ **Signature** _____ **Date** _____

Ages 12-13 Advanced

When: TUESDAYS– June 3, 10, 17, 24, July 1, 8, 15, 22, 29

Sessions: 9:30-10:45 a.m. or 11:00 a.m.-12:15 p.m.

Where: Elmwood Golf Course – 2604 W. Russell St.

Cost: \$171

Ages 14+ Advanced

When: WEDNESDAYS– June 4, 11, 18, 25, July 2, 9, 16, 23, 30

Sessions: 8:30-10:30 a.m.

Where: Kuehn Park Golf Course – 2900 Kuehn Park Rd.

Cost: \$173

Advanced: Those who have previously been in the First Tee Program for at least 3 years or play competitive golf

Our programs will be organized by the following age groups:

Ages 12-13: Middle School

Ages 14+: Middle/High School
(*still enrolled in high school)

This will enable our coaches to create meaningful and fun content aligned to each kids' developmental level. It will bring other benefits as well, from kids bringing friends into their classes to more teens staying with First Tee longer.

Health Information

Parent / Guardian Initials _____

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Media Release

Parent / Guardian Initials _____

I hereby give the First Tee Chapter, Headquarters Office and participating agencies permission to use film, video tape and/or photographs of the above mentioned minor for lawful promotional or informational purposes.

I, the parent/legal guardian of the above named youth, give approval for participation in the First Tee sponsored activities. I assume all risks of injury whatsoever and agree to hold harmless the First Tee Chapter and Headquarters Office from claim(s) of any nature arising from any activity, including transportation, connected with the First Tee facility or program. This hold harmless agreement includes, but is not limited to, any claim due to injury proximately resulting from negligence of the First Tee Chapter and Headquarters Office communicating information regarding my child's participation via the internet.

Emergency Contact: _____ Relationship: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____ Cell Phone (2): _____

Parent/Guardian Signature _____ **Date** _____ **Please Print Name** _____

Group Request: If you wish to be grouped with another participant please indicate so on this application. Deadline to request is May 1st. However, all requests are subject to availability based on the level of each participant and is not a guarantee. Being a part of the First Tee is about meeting new people so we wish to limit the amount of requests per individual.

FIRST TEE—SOUTH DAKOTA AT ELMWOOD GC FOR 12-13 AND AT KUEHN PARK GC FOR 14+

2025 REGISTRATION FORM for Tuesday and Wednesday Youth Program



Youth Information

Name: _____ Gender: Male ___ Female: ___ Birthdate: ___/___/___ Grade Level : _____

Phone: _____ Ethnicity: (circle) Caucasian/White, African American/Black, Hispanic/Latino, Asian, Pacific Islander, Native American/Native Alaskan, Multi-Racial

Address: _____ City: _____ State: _____ Zip: _____

Parent/Legal Guardian: _____ Parent/Guardian Email: _____

T-Shirt Size: Youth S ___ M ___ L ___ Adult S ___ M ___ L ___ XL ___ XXL ___ 3XL ___ School Name _____

Does your Participant Need to Borrow Golf Clubs: (circle) Yes/No

*If yes, circle if they are **right** or **left** handed. What is your participant's **height**? ___ ft ___ inches

please fill out health and media release above

12-13 Advanced: (Tuesdays) 9:30-10:45 ___ 11:00-12:15 ___

14+ Advanced: (Wednesdays) 8:30-10:30 ___

Cost: \$171 ___ \$173 ___ Cash ___ Check ___

CC # _____ **Exp. Date** _____ **CVV** _____ **Signature** _____ **Date** _____



First Tee—South Dakota at Elmwood Golf Course 2025 Little Duffers Program

2025 Little Duffers Program Ages 5 to 7*

When: Session 1—June 3, 5, 10, 12
Session 2—June 17, 19, 24, 26
Session 3—July 1, 2, 8, 10
Session 4—July 15, 17, 22, 24
Session 5—July 29, 31, August 5, 7

Time: 1:00pm – 2:00pm

Where: Elmwood Golf Course - 2604 W. Russell St.

Cost: \$81 – Financial assistance available –
email Chantel at info@firstteesouthdakota.org

Indicate on registration form your session preference

Class sizes are limited and are on a first-come, first-serve basis. To help our program become more successful we do encourage parents to volunteer for at least one of the classes. If you would like to be a parent volunteer, please contact us at 605-367-7092 or sign up below.

*If you have a 4 year old and are interested in signing up him/her into the Little Duffer program, please call us at 605-367-7092 to get them signed up.

About First Tee—South Dakota Program

First Tee of South Dakota improves the lives of young people by providing educational programs and learning environments that build character, instill life enhancing values, and promote healthy choices through the game of golf.

What is Little Duffers?

The Little Duffers Program is for children ages 5 to 7. The Little Duffers Program will provide the juniors a fun and safe environment in which to learn the basics of golf.

Building Game Changers

This program is designed for beginner and intermediate golfers ages 5-7.

Clubs are available at no cost.

****No young person will be turned away from First Tee—South Dakota due to an inability to pay!*****

First Tee—South Dakota
2025 Little Duffers Program—Ages 5 to 7
At Elmwood Golf Course
2604 W. Russell St., Sioux Falls, SD, 57104

Name: _____

Gender: Male _____ Female: _____ Birthdate: ___/___/___

Grade Level: _____ Phone: _____

Ethnicity: (circle) Caucasian/White, African American/Black, Latino/Hispanic
Asian, Native American/Native Alaskan, Pacific Islander, Multi-Racial

Address: _____

City: _____ Zip: _____

Parent/Legal Guardian: _____

Parent/Guardian Email: _____

T-Shirt Size: Youth S _____ M _____ L _____ Adult S _____

School Name _____

Session Preference: Please rank 1,2,3, 4 or 5
(you will be in #1 choice unless contacted by our program)

Session 1 _____ Session 2 _____ Session 3 _____ Session 4 _____

Session 5 _____

Date you would like to be a parent volunteer: _____ (optional)

Cost: \$81 Cash _____ Check _____

CC # _____ Exp. Date _____ CVV _____

Signature _____ Date _____

Health Information

In the event that I cannot be reached in an emergency, I agree to accept any and all determinations of need for medical assistance and/or administration of medical attention deemed necessary by the First Tee Chapter representatives. I hereby give permission to the medical personnel selected by the First Tee Chapter representatives to secure any and all medical, hospitalization, dental, and/or surgical treatment. In the event that such medical attention is needed from a healthcare provider, all costs shall be the responsibility of the parent or guardian.

Media Release

I hereby give the First Tee Chapter, Headquarters Office and participating agencies permission to use film, video tape and/or photographs of the above mentioned minor for lawful promotional or informational purposes.

I, the parent/legal guardian of the above named youth, give approval for participation in the First Tee sponsored activities. I assume all risks of injury whatsoever and agree to hold harmless the First Tee Chapter and Headquarters Office from claim(s) of any nature arising from any activity, including transportation, connected with the First Tee facility or program. This hold harmless agreement includes, but is not limited to, any claim due to injury proximately resulting from negligence of the First Tee Chapter and Headquarters Office communicating information regarding my child's participation via the internet.

Emergency Contact: _____ Relationship: _____

Work Phone: _____ Cell Phone: _____ Cell Phone 2: _____

Parent/Guardian Signature _____

Date _____ Please Print Name _____

Parent / Guardian Initials _____

Parent / Guardian Initials _____



2025 LPGA Girls Golf Program

**2025 —New and returning participants
to First Tee—South Dakota**

LPGA Girls Golf Program—ages 7 to 14+

When: Wednesdays—June 4, 11, 18, 25, July 2, 9, 16, 23, 30

Session time: 8:00–9:15 a.m. or 9:30–10:45 a.m. or
11:00 a.m.–12:15 p.m.

Where: Elmwood Golf Course – 2604 W. Russell St.

Cost: \$166

Class Size: Class sizes are very limited.

This class is sponsored by LPGA and USGA Girls Golf

Our programs will be organized by the following age groups:

Ages 7–9: Elementary School

Ages 10–11: Elementary/Middle School

Ages 12–13: Middle School

Ages 14+: Middle/High School

(*still enrolled in high school)

This will enable our coaches to create meaningful and fun content aligned to each kids’ developmental level.

It will bring other benefits as well, from kids bringing friends into their classes to more teens staying with First Tee longer.

Health Information

Parent / Guardian Initials _____

In the event that I cannot be reached in an emergency, I agree to accept any and all determinations of need for medical assistance and/or administration of medical attention deemed necessary by the First Tee Chapter representatives. I hereby give permission to the medical personnel selected by the First Tee Chapter representatives to secure any and all medical, hospitalization, dental, and/or surgical treatment. In the event that such medical attention is needed from a healthcare provider, all costs shall be the responsibility of the parent or guardian.

Media Release

Parent / Guardian Initials _____

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Emergency Contact: _____ Relationship: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____ Cell Phone (2): _____

Parent/Guardian Signature _____ **Date** _____ **Please Print Name** _____

Group Request: If you wish to be grouped with another participant please indicate so on this application. Deadline to request is May 1st. However, all requests are subject to availability based on the level of each participant and is not a guarantee. Being a part of the First Tee is about meeting new people so we wish to limit the amount of requests per individual.



FIRST TEE—SOUTH DAKOTA AT ELMWOOD GOLF COURSE
2025 REGISTRATION FORM for LPGA Girls Golf Youth Program
at Elmwood Golf Course 2604 W. Russell St—Sioux Falls—SD—57104



Youth Information

Name: _____ Gender: Male _____ Female: _____ Birthdate: ____/____/____ Grade Level : _____

Phone: _____ Ethnicity: (circle) Caucasian/White, African American/Black, Hispanic/Latino, Asian, Pacific Islander,
Native American/Native Alaskan, Multi-Racial

Address: _____ City: _____ State: _____ Zip: _____

Parent/Legal Guardian: _____ Parent/Guardian Email: _____

T-Shirt Size: Youth S ___ M ___ L ___ Adult S ___ M ___ L ___ XL ___ XXL ___ 3XL ___ School Name _____

Does your Participant Need to Borrow Golf Clubs: (circle) Yes/No

*If yes, circle if they are **right** or **left** handed. What is your participant’s **height**? ____ ft ____ inches

please fill out health and media release above

Session Time: 8:00–9:15 ___ 9:30–10:45 ___ 11:00–12:15 ___

Cost: \$166 **Cash** ___ **Check** ___

CC # _____ **Exp. Date** _____ **CVV** _____ **Signature** _____ **Date** _____

2025 Teen Program

2025—New and returning participants to First Tee—South Dakota

Our programs will be organized by the following age groups:

Ages 12-13: Middle School

Ages 14+: Middle/High School
(*still enrolled in high school)

This will enable our coaches to create meaningful and fun content aligned to each kids' developmental level. It will bring other benefits as well, from kids bringing friends into their classes to more teens staying with First Tee longer.

Ages 12-13 Beginner/Intermediate

When: Tuesdays—June 3, 10, 17, 24, July 1, 8, 15, 22, 29

Sessions: 9:30-10:45 a.m. or 11:00 a.m.-12:15 p.m.

Ages 14+ Beginner/Intermediate

When: TUESDAYS - June 3, 10, 17, 24, July 1, 8, 15, 22, 29

Sessions: 11:00 a.m.-12:15 p.m.

Where: Elmwood Golf Course – 2604 W. Russell St.

Cost: \$166

Class Size: Class sizes are very limited.

Health Information

Parent / Guardian Initials _____

In the event that I cannot be reached in an emergency, I agree to accept any and all determinations of need for medical assistance and/or administration of medical attention deemed necessary by the First Tee Chapter representatives. I hereby give permission to the medical personnel selected by the First Tee Chapter representatives to secure any and all medical, hospitalization, dental, and/or surgical treatment. In the event that such medical attention is needed from a healthcare provider, all costs shall be the responsibility of the parent or guardian.

Media Release

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Emergency Contact: _____ Relationship: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____ Cell Phone (2): _____

Parent/Guardian Signature _____ **Date** _____ **Please Print Name** _____

Group Request: If you wish to be grouped with another participant please indicate so on this application. Deadline to request is May 1st. However, all requests are subject to availability based on the level of each participant and is not a guarantee. Being a part of the First Tee is about meeting new people so we wish to limit the amount of requests per individual.

FIRST TEE—SOUTH DAKOTA AT ELMWOOD GOLF COURSE



2025 REGISTRATION FORM for Tuesday Youth Program

at Elmwood Golf Course 2604 W. Russell St—Sioux Falls—SD—57104

Youth Information

Name: _____ Gender: Male _____ Female: _____ Birthdate: ____/____/____ Grade Level : _____

Phone: _____ Ethnicity: (circle) Caucasian/White, African American/Black, Hispanic/Latino, Asian, Pacific Islander, Native American/Native Alaskan, Multi-Racial

Address: _____ City: _____ State: _____ Zip: _____

Parent/Legal Guardian: _____ Parent/Guardian Email: _____

T-Shirt Size: Youth S ___ M ___ L ___ Adult S ___ M ___ L ___ XL ___ XXL ___ 3XL ___ School Name _____

Does your Participant Need to Borrow Golf Clubs: (circle) Yes/No

*If yes, circle if they are **right** or **left** handed. What is your participant's **height**? ____ ft ____ inches

please fill out health and media release above

Session Time: **Ages 12-13:** 9:30-10:45 ___ 11:00-12:15 ___ **Ages 14+:** 11:00-12:15 ___

Cost: \$166 **Cash** ___ **Check** ___

CC # _____ **Exp. Date** _____ **CVV** _____ **Signature** _____ **Date** _____