



Student Name: _____ Age: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact: _____

Relation to Participant: _____ Phone #: _____

Session Dates

Session 1 June 24 – July 5 Session 3 July 22 – August 2

Session 2 July 8 – July 19 Session 4 August 5– August 16

My child's playing level is: Beginner Intermediate Advanced

Payment Type: _____

Signature: _____ Date: _____

NOTE: Please enclose deposit of \$300.00 with registration

The Club it's officers-officials, owners, employees, instructors and other participants are not responsible for injuries, disability or death, or loss to personal property on its premises or parking lots. I willingly comply with the terms and conditions of participation.

Signature: _____ Date: _____