



Time: 4-6pm Ages 9+ Intro to competitive play, Ra PVTC Member  1 Day/Week \$210/month 2 Day/Week \$375/month 3 Day/Week \$530/month 4 Day/Week \$705/month Drop-in \$60	Non-Member  1 Day/Week \$250/month 2 Day/Week \$445/month 3 Day/Week \$630/month 4 Day/Week \$845/month  Drop-in \$70	Monday Tuesday Wednesday Thursday Friday  Please indicate any	day(s) you wish to register for Auto-Renew  The highly recommend enrolling in Auto-Renewal utomatically registering the student each month or the same days and guarenteeing a spot the allowing month. You may cancel at anytime. The sembers get priority to auto-renew.  The medical conditions or allergies below.
Sibling discount only for sign-ups of 2+ days/week 10% Sibling Discount (Packages only)  Player Information			
riayer information			
#1 Player:	Last Name:		DOB
#2 Player	Last Name:		DOB
Address:	City:	Sta	te: Zip:
Home Phone:			
Home Phone: Email: Cell Phone :			
Parent/Guardian Information			
First Name: Last Name:			
Address:			
			<u> </u>
Emergency Contact Information			
News		Deletionskin	
Name:			
Phone #1:Phone #2:			
Payment Information			
Amount <u>\$</u>	Check	Credit Card Account	(circle one)
RELEASE AND WAIVER OF LIABILITY In consideration of use of facilities and participation in <b>programs</b> and <b>events</b> provided by Palos Verdes Tennis Club, I/we agree to release, indemnify, defend and hold harmless PVTC, and their directors, officers, employees and agents (hereinafter "Indemnified Parties") from any loss, liability, claim, acti on, or suit (hereinafter "CLAIM") arising or alleged to arise from: (1) bodily injury or personal injury suffered by any party or Indemnified Parties' facilities,;(2) any bodily injury or personal injury caused by a participant in Indemnified Parties' programs and events (including off-site trips) and /or; (3) property damage or loss suffered in connection with, or as a result of, my us e and the Player's use of the facilities or participation in Indemnified Parties' programs and events including off-site events. I/we agree that I/we knowingly and voluntarily release and indemnify the Indemnified Parties from any such claim.			

\_ Date\_\_\_\_

Signature of Parent/Guardian:\_\_\_\_\_