

Palos Verdes Tennis Club

PV Tennis Academy

High Performance Winter Camp REGISTRATION FORM



PV Tennis Academy				
Winter Camp PVTC Member Ages 12+ Entire Week \$355	lember Ages 12+ Non-Member Invite Only			
Single Day \$90 Bring your own lunch/snack fo	Single Day \$95	Tuesday Wednesd Thursday Friday	ay	on run week signups
Please indicate any medical conditions or allergies below. PvtcJuniorTennis We use WhatsApp for all up-to-date communication.				
T-Shirt Size: YS YM YL AS AM AL AXL circle one please for each child				
Player Information				
#1 Player:	Last Name:		DOB	
#2 Player	Last Name:		DOB	
Address:	City:		State: Zip:	
Home Phone:	Email:		Cell Phone :	
Please email info@pvtennisclub.com with any questions.				
Parent/Guardian Information				
First Name:	L	ast Name:		
Address:	City:		State Zip:	
Emergency Contact Information				
Namo		Polationship		
Name:Phone#1:				
Payment Information				
Amount <u>\$</u>	Cash	Check C	redit Card Account	(circle one)
RELEASE AND WAIVER OF LIABILITY In consideration of use of facilities and participation in programs and events 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 use 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.				

Signature of Parent/Guardian: _____ Date_____