SVERDES TENHIS	Palos Verdes Tennis Club Spring Academy 2024 Hot Shots Registration Form January 2nd - June 7th		Wilson . MORE WIN:
2 Day/Week \$180/month 2 Day/We		Tuesday Auto-F Wednesday each n	s) you wish to register for Auto-Renew Renew will automatically register the student nonth for the same days. You may cancel time. Members get priority to auto-renew.
Please indicate any medical conditions or allergies below. Drop-in \$30 Drop-in \$35 Sibling discount only for sign-ups of 2+ days/week Image: We use WhatsApp for all Up-to-Date communication. T-Shirt Size: YS YM YL AS AM AL AXL Circle one for each child 10% Sibling Discount Image: Player Information			
#1 Player:			_ DOB
#2 Player	Last Name:		_ DOB
		State:	
Home Phone: Email:_		Cell Phone :	
Parent/Guardian Information			
First Name:		me: State	
Emergency Contact Information			
Name: Relationship: Phone #1: Phone #2:			
Payment Information			
Amount <u>\$</u>	Cash Che	ck Credit Card	Account (circle one)

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 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.

Signature of Parent/Guardian:_____ Date_____