

SUMMER TENNIS CAMP REGISTRATION

Please send the following information and all checks to Jeff Arons at the following address: 115 Willowbrook Drive, Portola Valley, CA 94028. All checks should be made payable to "Jeff Arons". Spots will be allocated in the order the checks are received. Please print clearly the information requested below. A full payment must accompany the application or it will not be processed. Once your child is properly enrolled, you will receive a confirmation via email. Thank you.

Student's name:	
Student's grade (2010-2011 school year):	
School Attending:	
Tennis experience: (circle one)	Beginner, Intermediate, Tournament player Ranked tournament player
Parent's name:	
Home phone number:	
Cell phone number:	
Address:	
Email address:	
Tennis Camp(s) attending (session #, dates, time)	
Court groupings (list friends you would like to be grouped with)	
How did you find out about our tennis camp?	
Food allergies of note:	
Amount enclosed:	

Cancellations: If you have to cancel and do so in writing by May 15 (please send to the above address or email me at jeffarons@mindspring.com), a full camp credit valid for any of the appropriate camps that are not filled to capacity will be issued for the 2011 summer session. The camp credit is transferable to a family member only. No cash refunds. Thank you.

WAIVER OF LIABILITY: By signing below, student/parent understands and accepts that he/she or their child who is named above is taking tennis lessons at his/her own risk. Student/parent hereby expressly waives any claim of liability against Jeff Arons, Jeff Arons Tennis, their agents and contractors for any negligence, personal injury, premises liability or other damages which occur to student during the above described tennis lessons.

This waiver is a complete release of any responsibility for injuries or damages sustained whether or not the student was engaged in playing tennis at the time of the injury.

Name: _____

Signature: _____ Date: _____