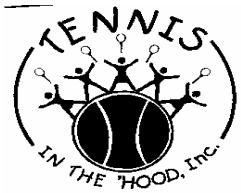

Junior Team Tennis

P. O. Box 962017, Riverdale, GA 30296
(770) 997-4798

☐ New
☐ Returned

REGISTRATION FORM

Name: _____ _____
Last (Please Print) **First** (Please Print)

Address:_____ **County**_____

_____ _____
City **Zip**

Phone: (_____) _____ - _____ **Birth date:** _____ / _____ / _____

ADDITIONAL PLAYER INFORMATION

Last Team:_____ **School:**_____ **Grade.** _____ **Male** ☐ **Female** ☐
Other children registering:_____
Physical problems we should know about?_____
Shirt size circle: Adult: S M L XL Child: XS S M L
Park Preference: Burdette Creel Trammel Crow Welcome-All Cliftondale

PARENT GUARDIAN INFORMATION

Parent(s): _____ **Phone #**_____

Emergency contact_____ **Phone #**_____

WILLING TO VOLUNTEER

☐Coach ☐Newsletter ☐Team Mom ☐Fund Raising
☐Assistant Coach ☐Telephone Calling ☐Typing ☐Publicity
☐Administration ☐Field maintenance ☐Referee/score keeper

Waiver: I understand that a tennis instructional program is a physical sport that may cause some injuries. I have also taken the necessary actions to make sure that my child is physical fit and has the doctor's permission to participate in a sport program. As the parent or legal guardian of the child listed above, I hereby release and discharge Tennis In the Hood, Inc., officers, employees, volunteers and all other organizations affiliated with the program from all claims, liabilities and actions directly or indirectly caused by my child's participation in this program. I also give permission for my child to participate in promotional publicity which may include photography, newspaper and television and all other media as long as it is legal.

Signature of Parent(s) or Guardian_____Date_____

OFFICE USE ONLY

Skill level: beginner 1st 2nd intermediate

Paid: Check #_____ Cash receipt #_____

Publicity: park school friend newspaper radio television flyer mailing

League: ☐ level I (intra-league) ☐ level II (metro league)

(For April 2004)