

Junior Recreational Program Sign-up Form Summer 2010

Name of Student: _____

Home Phone #: _____ Cell Phone #: _____ E-Mail: _____

Member #: _____ Please bill my account = \$ _____ Amt. enclosed = \$ _____

Pro Approval: _____

Circle Program:

Quick Start Tennis Points Teen Player Academy Games Sets QuickStart Match Play

Days / Time: _____

Circle Session:

Session 1: **June 14 – July 10** Session 2: **July 12 – July 31** Session 3: **August 2 – August 21**

Student will attend classes on: Mon Tues Wed Thurs Fri Sat

Parent of Guardian Signature: _____ Date: _____

BY SIGNING ABOVE, IT IS ACKNOWLEDGED THAT ALL PARTICIPANTS AND PARENTS MUST BE ADVISED THAT NEITHER THE RACQUET CLUB OF COLUMBUS, ITS EMPLOYEES, OFFICERS, OR ANY REPRESENTATIVE THEREOF, ARE RESPONSIBLE IN ANY MANNER FOR ANY INJURY THAT RELATES TO OR MAY RESULT FROM ACTIVITY IN THIS PROGRAM OR ANY RELATED PROGRAM IN ANY WAY. ANY DAMAGE THAT MAY OCCUR AS A RESULT OF THE ACTION OF ANY PROGRAM PARTICIPANT, OR AFFILIATE PERSON, WILL BE THE RESPONSIBILITY OF THAT PERSON (OR PARENT/GUARDIAN). THE RACQUET CLUB OF COLUMBUS AND ANY AND ALL OF ITS AFFILIATES ASSUME NO RESPONSIBILITY, IN ANY WAY, FOR THE ACTIONS THAT MAY INVOLVE THE ABOVE, OR ANYTHING THAT MAY BE DETRIMENTAL TO THE ABOVE, EITHER FINANCIAL OR OTHERWISE.