

PT Lady Warrior Tennis Camp



Learn to play tennis with the coaches and team members of PT Lady Warrior Tennis Team!

WHEN: Monday, June 3rd - Wednesday, June 5th, 2019

TIME: 6-8pm at the Penn Trafford High School Tennis courts

Open to boys and girls in Grades 1-8 in the current school year
(2018/2019)

COST: \$30.00 for Penn Trafford residents, \$40.00 to those outside the district

Please bring a racquet and refillable water bottle.

DEADLINE TO REGISTER: May 20, 2019

REGISTRATION: Please fill in the attached form and with a check made payable to PENN TRAFFORD LADY WARRIOR TENNIS and mail to: Iryna Bidochko, 1007 Lexington Drive, Export, PA 15632

PT Lady Warrior Tennis Camp

Name (s): _____ Current Grade(s): _____

T-Shirt Size (circle one): Youth S, Youth M, Youth L, Youth XL

Adult S, Adult M, Adult L, Adult XL

Parent name: _____ Phone number: _____

Address: _____

Email: _____

TOTAL: _____

Waivers and Informed Consent: By signing this form, I, as parent/guardian, permit the PT Lady Warrior Tennis to use pictures of my child(ren) as a program participant in promotional literature. I understand my child(ren)'s name(s) will not be published. I, as parent/guardian of _____ ("Child(ren)), hereby assume all risks and hazards incidental to the conduct of the activities at Penn Trafford High School. My Child is fit for the program(s) in which I have enrolled him/her. I HERELY RELEASE AND SHALL DEFEND, INDEMNIFY AND HOLD HARMLESS RELEASEES FROM EVERY CLAIM AND ANY LIABILITY THAT I OR MY CHILD MAY ALLEGE AGAINST RELEASEES (including reasonable legal fees and costs) AS A DIRECT OR INDIRECT RESULT OF INJURY OR DEATH TO ME OR MY CHILD BECAUSE OF MY CHILD'S PARTITIPATION IN the PT Tennis program, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERS TO THE MAXIMUM EXTENT PERMITTED BY LAW. I PROMISE NOT TO SUE ON MY BEHALF OR ON BEHALF OF MY CHILD REGARDING ANY CLAIM ARISING FROM OR RELATED TO MY CHILD'S PARTICIPATION IN the PT Tennis camp. I ACKNOWLEDGE THAT, BY SIGNING THIS DOCUMENT, I AM RELEASING PT Lady Warriors Tennis and PT School District AND THEIR REPRESENTATIVES, AGENTS, VOLUNTEERS, OR MEMBERS FROM LIABILITY, AND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. THIS SIGN UP AND RELEASE FORM IS A CONTRACT WITH LEGAL AND BINDING CONSEQUENCES AND IT APPLIES TO ALL ACTIVITIES IN WHICH MY CHILD (REN) ENGAGES DURING THE SUMMER CAMP AT PT High School, REGARDLESS OF WHETHER SUCH ACTIVITY IS A PART OF A FORMAL PROGRAM. I HAVE READ THIS RELEASE CAREFULLY BEFORE SIGNING. I UNDERSTAND WHAT THIS RELEASE MEANS AND WHAT I AM AGREEING TO BY SIGNING. I understand that there is no insurance coverage provided by PT Lady Warrior Tennis or Penn Trafford School District for participants in these activities.

Signature: _____ Date: _____

Printed Name: _____ Parent _____ Guardian

Name and age of Participant(s) (print): _____