

REGISTRATION FORM

- Please fill out the form completely
- Write check for \$35, payable to Palo Alto Tennis Club
- Print out completed form, sign, staple check to form, and mail to Linda Lee, 2680 Ramona St, Palo Alto 94306

Child's Name (Last, First):

Age:

Grade:

Address:

Telephone: ()

Parent's Name(s):

Email address (please list primary email address first):

Child's shorts size: S(8), M(10-12), L(12-14):

Division: Beginner (foam/champs balls), Intermediate (champs/standard balls), Advanced (standard balls):

Waiver: I assume all risks of playing tennis including playing in high heat or humidity, and sustaining falls, scrapes and muscle injury. I waive and release the City of Palo Alto and the Palo Alto Tennis Club from all claims and liabilities of any kind arising out of my participation in this program.

Signature of parent or guardian: _____ Date:_____.