

Whitesboro PARD and the WISD Tennis Program offer Youth Summer Tennis Camp



Dates:
June 7-11, 2010

Times:
6 to 10 year olds—8-10 AM
11 to 14 year olds—10:15-12:15 PM

Site:
Hayes Primary School Tennis Courts at 115 Fourth Street.

Camp Coach:
WISD Tennis Coach Sam Rodriguez

Fees:
1 Child--\$60.00
2 Children--\$85.00
3 Children--\$110.00

The cost of the camp will include professional instruction, certificates, prizes, and camp t-shirts. Photos and a camp CD will be available for sale following the camps. Enrollment is limited to the first 25 students in each age division. Proceeds to benefit the WISD Tennis Program.

Return registration form and fee to the PARD at 400 Wilson Street, Whitesboro. Make checks payable to Sam Rodriguez.

Camp Age _____ Email Contact _____

Player's Last Name _____ First _____

Address _____ City _____

State _____ Zip _____ Daytime Phone _____

Age on first day of camp _____ Male/Female _____

Father's Name _____ Cell Number _____

Mother's Name _____ Cell Number _____

Medical Problems of Player _____

Doctor To Notify In Emergency _____ Phone _____

Person To Notify In Emergency (Not Parents) _____ Phone _____

SHIRT SIZE – CIRCLE ONE YS / YM / YL / AS / AM / AL / AXL / AXXL

LIABILITY WAIVER AND CONSENT FOR MEDICAL TREATMENT

I, HEREBY GIVE MY APPROVAL FOR THE ABOVE-NAMED TO PARTICIPATE IN THE PARD RECREATIONAL TENNIS CAMP. I ASSUME ALL RISK AND DO HEREBY WAIVE, RELEASE LIABILITY AND AGREE TO HOLD HARMLESS THE CITY OF WHITESBORO, THE WHITESBORO INDEPENDENT SCHOOL DISTRICT, SAM RODRIGUEZ, THE PARD, THE ORGANIZERS, SPONSORS, SUPERVISORS, PARTICIPANTS. AS THE PARENT OR LEGAL GUARDIAN OF THE ABOVE-NAMED PLAYER, I HEREBY GIVE CONSENT FOR EMERGENCY MEDICAL CARE PRESCRIBED BY A DULY LICENSED DOCTOR OF MEDICINE OR DENTISTRY. THIS CARE MAY BE GIVEN UNDER WHATEVER CONDITION ARE NECESSARY TO PRESERVE THE LIFE, LIMB OR WELL-BEING OF MY DEPENDENT. I DO HEREBY FULLY AND FREELY CONSENT TO THE USE OF THE PARTICIPANT'S PHOTOGRAPH FOR PROMOTIONAL PURPOSES ON BOTH PRINTED MATERIALS AND WEBSITES. I DO HEREBY RELEASE AND HOLD HARMLESS THE CITY OF WHITESBORO FROM ANY LIABILITY ARISING OUT OF SAID PARTICIPATION IN A PUBLICATION, ADVERTISEMENT, AND/OR PROMOTION.

Signature Of Parent/Guardian _____