



# REVISED Juniors!



Learn to play tennis or improve your skills!

## BLAIRWOOD SPRING BREAK TENNIS CAMP

AGES: 5 to 15 (will be grouped by age & ability)

**Optional SWIM from 1:00-2:00 – no extra charge!!**

Camp will focus on tennis fundamentals – footwork, stroke production, ball tracking, shot patterns, competitive drills , match play and will emphasize fun!

***For optional swim – child must be water safe and be able to swim.***

WHEN: April 5 \_\_\_ 6 \_\_\_ 7 \_\_\_ 8 \_\_\_ Check day(s)      Swimming 1:00-2:00 (Optional)  Yes  No

(Sign up for all four days, or pick the number of days you want to attend)

TIME: Full Day:     9:00 a.m. – 4:00 p.m. (*Please bring a brown bag lunch*)

Half Day:     9:00 a.m. – 12:00 p.m.       1:00 p.m. - 4:00 p.m.

	<u>MEMBER</u>	<u>NON MEMBER</u>
COST: Full Day Camp:	1-Day = \$55	1-Day = \$65
	2-Days = \$105	2-Days = \$125
	3-Days = \$150	3-Days = \$175
	4-Days = \$175	4-Days = \$200

	<u>MEMBER</u>	<u>NON MEMBER</u>
COST: Half Day Camp:	1-Day = \$30	1-Day = \$40
	2-Days = \$55	2-Days = \$75
	3-Days = \$80	3-Days = \$100
	4-Days = \$100	4-Days = \$125

Early Drop Off: Camper can be dropped off at 8:00a.m.

\$10 per day fee for 1<sup>st</sup> child, and \$5 per day fee for each additional child (siblings only)

Late Pick Up: Camper must be picked up by 5:30 p.m.

\$15 per day fee for 1<sup>st</sup> child, and a \$5 per day fee for each additional child (siblings only)

# BLAIRWOOD SPRING BREAK CAMP REGISTRATION

CAMPER: Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex:  Male  Female

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_ (Required)

## Parent/Guardian Information

MOTHER LAST NAME FIRST NAME WORK PHONE CELL PHONE

FATHER LAST NAME FIRST NAME WORK PHONE CELL PHONE

In the event the Parent/Guardian cannot be reached in case of an emergency, please contact:

LAST NAME FIRST NAME WORK PHONE CELL PHONE

**HOW MUCH DO I OWE?** (Please note: the camper must be a Blairwood or LTC member to pay the member rate.)

Camp(s) Registering for:	<u>Half Day</u>	<u>Full Day</u>	<u>Early Drop Off</u>	<u>Late Pick Up</u>	<u>AMOUNT DUE</u>
Member:	_____	_____	_____	_____	\$ _____
Non-Member:	_____	_____	_____	_____	\$ _____

**Full payment is due with registration. Payable by Cash, Check, or Credit/Debit card.**

If Credit Card: TYPE CARD(✓)  Visa  Master Card  American Express  Discover

Name of Cardholder: \_\_\_\_\_ Amount Due: \$ \_\_\_\_\_

Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_

**Please Note: Only the amount you have indicated will be charged to your credit card.**

**Refunds can be given if a conflict arises, however, there will be a \$25 processing fee for all refunds.**

## Parent/Guardian Agreement *Please read carefully and sign below:*

In consideration of registering my child (or dependent, if Guardian; both hereinafter referred to as "Participant") for the Blairwood Tennis and Swim Camp(s) (the "Camp") at Blairwood Tennis, Swim and Fitness Club ("Blairwood"), I certify that Participant is of normal health and in proper physical condition to participate in the Camp, and has not been otherwise informed by a physician. On behalf of Participant, I acknowledge that I am aware of the risks inherent in participating in tennis and swimming (both practice and competition); that tennis and swimming are physical sports which can require considerable running, starting, stopping and physical exertion; in heat and humidity; and could potentially lead to over heating and dehydration; possible limb injuries; possible permanent disability and death; and agree to assume all of those risks and to waive any and all rights to claims for injuries, loss or damages arising out of the Participant's participation in the Camp(s).

I further certify that the Participant maintains adequate health insurance to cover any injuries occurring as a result of participation in the Camp(s) at Blairwood.

In the event I cannot be reached in an emergency, I hereby give permission to the Blairwood staff to secure emergency medical services, including transportation and physician.

PRESS/MEDIA RELEASE: We permit the free use of our name and family members names and pictures used on this application in broadcasts, telecasts, newspapers, brochures, and any other form of communication to which such use may be applied.

SIGNATURE OF PARENT(S)/GUARDIAN: \_\_\_\_\_