

# Blairwood Tennis, Swim & Fitness Club - Junior Tennis Registration

**EASY TO REGISTER:** Please complete and return to: Blairwood Tennis, Swim & Fitness Club  
9300 Blairwood Rd  
Louisville, KY 40222 - Or Fax to: 425-7918

- Clinic availability is determined on a *first-come-first-serve basis* - sign-up early, as spots are limited!
- Make-ups allowed only if clinics are not full and must be approved by the instructor.

## APPLICANT INFORMATION – Please print legibly. Thank you.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Age \_\_\_\_\_

Parent(s) Name \_\_\_\_\_

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

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

## PLEASE CHECK THE SESSION(S) FOR WHICH YOU ARE REGISTERING:

- BACK TO SCHOOL – MINI SESSION** (4weeks): August 17 – September 13
- SESSION 1: September 14 – October 25
- SESSION 2: October 26 – December 13 (off week of November 23 for Thanksgiving)
- SESSION 3: January 4 – February 14
- SESSION 4: February 15 – March 28
- SESSION 5: March 29 – May 16 (off week of April 5 for Spring Break)

Cost: Mini Session: \$57 members/\$64 non-members – All other sessions \$85 members/\$96 non-members

## PLEASE CHECK THE CLINICS FOR WHICH YOU ARE REGISTERING:

### Mighty Mites – Level I (QuickStart)

- Monday 4:00 - 5:00PM
- Tuesday 1:00 - 2:00PM
- Wednesday 4:00 - 5:00PM
- Saturday 12:00 - 1:00PM

### Mighty Mites – Level II (QuickStart)

- Monday 5:00 - 6:00PM
- Wednesday 5:00 - 6:00PM
- Friday 4:30 - 5:30PM
- Saturday 1:00 - 2:00PM

## PAYMENT INFORMATION: *Full Payment must accompany registration. (\$25 processing fee for refunds)*

Payment method:  Cash  Check  Visa  MasterCard  American Express  Discover

Amount: \$ \_\_\_\_\_ Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_ 3-digit Code: \_\_\_\_\_

## 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 Junior Tennis Clinic(s) (the “Clinics”) 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 Clinic, 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 (both practice and competition); that tennis is a physical sport which can require considerable running, starting, stopping and physical exertion; in heat and humidity; and could potentially lead to overheating 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 Clinic(s).

I further certify that the Participant maintains adequate health insurance to cover any injuries occurring as a result of participation in the Clinic(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:** \_\_\_\_\_