

Junior Registration Form

Name _____ Date of Birth: ____/____/____ Age: ____ Sex: M F
Parent(s) Name(s): _____ Home Phone; (____) ____-____ Office; (____) ____-____
Home Address: _____ City: _____ State: _____ Zip: _____ Cell: (____) ____-____
Email _____

Session Starting Date: ____/____/____ Number of Weeks: ____ Do you want room and board? Yes No
If yes, Single Double with someone my age: or name of roommate (if applicable) _____

Tennis Level (Circle): Novice Beginner Intermediate Adv. Intermediate Advanced Tour. Player
Program Desired (Circle): Basic H.S. Training Tourn. Training Counselor in Training (16-18 yrs. only)

Payment: * Check ; Credit Card ; Deposit (\$300 per session); Full Payment

MasterCard or Visa Card # _____ / _____ / _____ Exp. _____

Health Insurance Carrier: _____ Policy #: _____

Parent(s)/Guardian(s) agreement: I have read the Swarthmore Tennis Camp brochure, including the Camp Rules and the Cancellation/Refund policy sections and grant permission for my child (or ward) to participate in the Swarthmore Tennis Program and non-tennis activities, I understand and agree that my child will abide by the Camp Rules and realize that any breach of those rules may result in immediate expulsion from camp without refund, which is in the sole discretion of the Camp Director. I agree to pay the amount specified above, and if payment is made by credit card, I agree to pay the amount specified above in accordance with the card issuer agreement. I authorize TENNIS CAMPS LTD., or its authorized agents, at its or their discretion to place my child in a medical facility in the care of licensed health care providers at my sole cost and expense. In the event of injury to my child in the course of instruction or free time, without fault of TENNIS CAMPS LTD. I agree to indemnify and hold harmless TENNIS CAMPS LTD. and SWARTHMORE COLLEGE, and their officers, respective agents and employees from all loss, claims and liabilities with respect thereto. TENNIS CAMPS LTD. Retains the right to use photographs of my child that are taken at camp.

How did you hear about us?
Friend Ad Internet
Other _____

Signature: _____ Date: _____
[Make check payable to Swarthmore Tennis Camp & Mail to 444 East 82 St., Suite 31D, NY, NY 10028-5919](#)