

Churchville Recreation Council

Gold Cup Tennis 2017



Player Development A and B (Invitation only)
9:00 a.m. - 12:00 p.m., Monday through Thursday
(make-ups on Fridays)

Cost - \$180 per week
 Form and payment due by June 5th

Class sizes are limited so register early to guarantee spot. Registration received after June 5th will be subject to \$10 late fee. This will be enforced! A \$30 service fee will be collected for returned checks. No refunds or guaranteed make-ups for inclement weather, including excessive heat. At this time we are unable to offer daily rates or prorated fees.

Questions? Please email churchilletennis@gmail.com



Please check the session(s) you are registering for below:

	Session 1: June 19-22, 9:00 am-12:00 pm
	Session 2: July 10-13, 9:00 am-12:00 pm
	Session 3: July 31-August 3, 9:00 am-12:00 pm
	Session 4: August 21-24, 9:00 am-12:00 pm

Time/Class _____

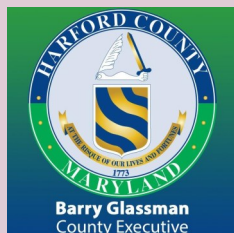
Name _____ Email _____ Age _____

Phone _____ Address _____

In case of emergency call _____

Any medical problems? If so, please explain _____

I do hereby expressly agree that I will not hold the instructor, the Churchville Rec. Council, Harford County Parks and Recreation, Harford County, Maryland, a body corporate and politic of the State of Maryland, its employees, volunteers, agents, officers and elected or appointed officials, responsible for any injuries received during the program. I understand that there is an inherent risk involved in any program. I certify, by my signature, that I understand this and agree. I also certify that my child is physically capable of participating. I will make the instructors aware of any allergies and/or medical problems. By my signature I acknowledge my understanding of the Concussion Information, SB771/HB858, which requires that all parents/guardians and athletes be made aware of the dangers a concussion may have on an athlete. This can be found at the Center for Disease Control, www.cdc.gov/headsup/youthsports/index.html. Also the Sudden Cardiac Arrest, HB 427, which requires that all parents and athletes be made aware of the dangers that sudden cardiac arrest may have on an athlete, found at www.nhlbi.nih.gov/health/health-topics/topics/scda. Further information on both can be found by calling 1-800-232-4636.



Parent Signature _____ Date _____

Mail to: Tennis Program P.O. Box 515, Churchville, MD 21028