Richmond Hill Area Tennis Association

Junior players ages 4 – 16 are invited to attend our 2009 Junior Tennis Camp.
Ages 4 – 6 will receive four, ½ hour lessons. Ages 7-16 will receive four, two hour lessons to include competitive play. Lessons are based on the USTA approved Tennis Curriculum Guide.

For more information about Junior Tennis Programs, please e-mail us at: richmondhilltennis@yahoo.com or visit our website: www.richmondhilltennis.com

***Mail w/a check or pay online using a credit card***
***RHATA, P.O. BOX 2431, Richmond Hill, GA, 31324***

**TENNIS CAMP**

Ages 4 – 6 Time: 8:30 – 9:00 am Cost: $25 ____

Ages 6 - 16 Time: 9:00 – 11:00 am Cost: $75 ____

**Name: _____Male: ____Female:____ Birthday: _____Age:_____**

**School: _____Grade: _____**

**Parent/Guardian's Name: _____**

**Address: _____**

**Emergency Contact Info: (**name, phone numbers) _____

**E-mail Address: (** RHATA does not give out e-mail addresses or any other personal information.)_____

**RELEASE OF LIABILITY AND WAIVER AGREEMENT**

I hereby give my child_____ and/or myself permission to participate in this and all RHATA programs in 2008.

Pre-existing medical conditions:_____

I/we understand that participation in all RHATA/Bryan County Recreation Department Tennis Programs may include the risk of injury, which may range in severity. With full understanding of the risk involved, I/we hereby agree to hold harmless and forever discharge RHATA and Bryan County Recreation Department and its staffs including all of its officers, coordinators, instructors, directors, officials, agents, employees, volunteers and representatives and other participants and their family members from all claims, demands, rights and causes of action of whatever kind of nature, arising from and by reason of any and all known and unknown, foreseen and unforeseen, bodily and personal injuries, damage to property, and the consequences thereof, resulting from my child's participation in the sport of tennis. I/we have read this waiver and liability release and fully understand its terms, and sign it freely and voluntarily without inducement.

**Parent/Guardian Signature_____ Date: _____ Printed Name:_____**

5/09