

**2008 SPRING AFTER-SCHOOL Lesson
REGISTRATION FORM
HOWARD PARK TENNIS CLUB**

Name _____ Age _____

Parents _____

Address _____

Telephone(res) _____ (bus/cell) _____

e-mail _____

Tiny Tots First Serve Lobbers 4pm 5pm

Smashers 4pm 5pm Teens High Perf.

Session 1 1 day/wk (day Mon Wed) 2 day/wk

Session 2 1 day/wk (day Mon Wed) 2 day/wk

Cost \$ _____ + GST(5%) _____ Total \$ _____.

Payment: ___ Cash / ___ Cheque

Pls. make cheques payable to **Armstrong Tennis Academy**

Registration forms and payment can be dropped off at Howard Pk. In the clubhouse or mailed to:
Armstrong Tennis Academy c/o Ben Armstrong
63 Raymore Dr. Toronto, Ont. M9P 1W8

A 48 hour cancellation notice is required.
\$15 admin. fee applies

Waiver Agreement

In consideration of the benefits expected to be derived from the admission of myself, I hereby remise, release and forever discharge the tennis professionals, their servants and agents, members and participants of and from any and all actions, causes of actions, claims and demands whatsoever in any way arising out of injury or illness of myself or loss or damage to property occurring during or as a result of anything done or left undone by the professionals or any of the other persons hereby released in connection with the operation of the Tennis clinics or anything arranged by it to take place outside of its training premises. In witness whereof we have hereunto set our hands and seals this _____ day of _____ 2008

Name of participant _____ Date _____

Parent's (Guardian's) Signature _____

Witness _____ Date _____

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