



*"A Coastal Treasure In Recreation"*

**PARKS & RECREATION**

# Youth Tennis Registration Form

Instructor: Dave Gongora

Participant's Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Contact Information (phone): \_\_\_\_\_

\_\_\_\_\_

Email (optional): \_\_\_\_\_

Father's Name: \_\_\_\_\_ Contact Information (phone): \_\_\_\_\_

Email (optional): \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

## **Permission Form & Insurance Release:**

I/we do hereby give my approval for his/her participation in any and all of the activities provided by the Brunswick County Parks and Recreation Department and Brunswick County. I/we hereby assume all risks and hazards incidental to the conduct of the activities, transportation to and from activities and do further release, absolve, indemnify, and hold harmless the Brunswick County Parks and Recreation Department, organizers, the sponsors and the supervisors, and all of them. In case of injury, all claims against the Brunswick County Parks and Recreation Department, organizer, or any of the supervisors appointed by them are hereby waived. Nothing herein constitutes the waiver of rights under any health and accident insurance there in effect.

**Registration fees:** Fees are paid directly to the instructor, Dave Gongora, and full payment is due at time of registration.

**Picture Consent for Film/Website/Advertisements:** I/We give permission to have my child's picture on the Brunswick County Parks and Recreation website, program advertisements, videos, and any other medium strictly used to promote Brunswick County Parks and Recreation.

**Parental Medical Treatment Authorization:** In the event of injury to my/our child, I/we hereby grant authority to a qualified paramedic/physician to render such medical treatment as said paramedic/physician deems necessary under the circumstances.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_