SNERDES TENHIS	Palos Verdes Tennis Club Spring Academy 2025 Hot Shots Registration Form January 6th - May 30th		Wilson. More win:	
Time: 3:30-4:15 Level 1- Ages Games, Hand-Eye Coordina PVTC Member 1 Day/Week \$105/month 2 Day/Week \$185/month 3 Day/Week \$265/month		Please Indicate below t Monday Tuesday Wednesday Thursday Friday	Auto-Renew Auto-Renew will autom each month for the san at anytime. Members g	natically register the student ne days. You may cancel et priority to auto-renew.
Please indicate any medical conditions or allergies below. Drop-in \$30 Drop-in \$35 Sibling discount only for sign-ups of 2+ days/week T-Shirt Size: YS YM YL AS AM AL AXL Circle one for each child 10% Sibling Discount (Packages only) Player Information				
#1 Player:	-	mormation	DOB	
#2 Player Address:				
Home Phone:	Email:		one :	
Parent/Guardian Information				
First Name:Last Name:				
Address:		State		
Emergency Contact Information				
Name: Relationship: Phone #1: Phone #2:				
Payment Information				
Amount <u>\$</u>	Cash C	heck Credit Car	d Account	(circle one)
RELEASE AND WAIVER OF LIABILITY				

In consideration of use of facilities and participation in programs and events provided by Palos Verdes Tennis Club, I/we agree to release, indemnify, defend and hold harmless PVTC, and their directors, officers, employees and agents (hereinafter "Indemnified Parties") from any loss, liability, claim, acti on, or suit (hereinafter "CLAIM") arising or alleged to arise from: (1) bodily injury or personal injury suffered by any party or Indemnified Parties' facilities,;(2) any bodily injury or personal injury caused by a participant in Indemnified Parties' programs and events (including off-site trips) and /or; (3) property damage or loss suffered in connection with, or as a result of, my use and the Player's use of the facilities or participation in Indemnified Parties' programs and events including off-site events. I/we agree that I/we knowingly and voluntarily release and indemnify the Indemnified Parties from any such claim.

Signature of Parent/Guardian:_____ Date_____