

Palos Verdes Tennis Club

Fall Academy 2024

High Performance Registration Form

September 3rd - December 20th



Invit Competitive play, Strategy, & Condi PVTC Member Non- 1 Day/Week \$250/month 1 Day 2 Day/Week \$445/month 2 Day 3 Day/Week \$630/month 3 Day Drop-in \$70 Drop Sibling discount only for sign-ups of 2+ of T-Shirt Size: YS YM YL AS AM AL AXL	Please Indicate below the day(s) you wish to register for Monday Tuesday Auto-Renew will automatically register the student each month for the same days. You may cancel Thursday Thursday Triday Thursday Thurs				
Player Information					
#1 Player: #2 Player Address: Home Phone: Er	Last Name:	Cell Pl	State:	_ Zip:	<u> </u>
Parent/Guardian Information					
First Name:Address:		lame: State		Zip:	_
Emergency Contact Information					
Name: Relationship: Phone #1: Phone #2: Payment Information					
Amount \$,	heck Credit C	ard	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, action, 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 us e 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 Date					
Signature of Parent/Guardian:		Date			