



**Palos Verdes Tennis Club**  
**Fall Academy 2024**  
**Challenger Registration Form**  
**September 3rd - December 20th**



Time: 4-6pm Ages 9+

**Intro to competitive play, Rallies & Skill development**

**PVTC Member**

- 1 Day/Week \$210/month
- 2 Day/Week \$375/month
- 3 Day/Week \$530/month
- 4 Day/Week \$705/month

**Non-Member**

- 1 Day/Week \$250/month
- 2 Day/Week \$445/month
- 3 Day/Week \$630/month
- 4 Day/Week \$845/month

- Drop-in \$60
  - Drop-in \$70
- Sibling discount only for sign-ups of 2+ days/week*

Please Indicate below the day(s) you wish to register for

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

**Auto-Renew**

*Auto-Renew will automatically register the student each month for the same days. You may cancel at anytime. Members get priority to auto-renew.*

**Please indicate any medical conditions or allergies below.**

T-Shirt Size: **YS YM YL AS AM AL AXL** Circle one for each child

10% Sibling Discount (Packages only)

**Player Information**

#1 Player: \_\_\_\_\_ Last Name: \_\_\_\_\_ DOB \_\_\_\_\_

#2 Player \_\_\_\_\_ Last Name: \_\_\_\_\_ DOB \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Parent/Guardian Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

**Emergency Contact Information**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2: \_\_\_\_\_

**Payment Information**

Amount \$ \_\_\_\_\_ Cash Check Credit Card 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 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 \_\_\_\_\_