THRIVE Junior Registration



Participant Name		Date of Birth				
Gender: MF Other	Ethnicity: Caucasian	African American	Hispanic	Asian	Pacific Islander	Other
Participant Name		Date of Birth				
Gender: M F Other	Ethnicity: Caucasian	African American	Hispanic	Asian	Pacific Islander	Other
Participant Name	rticipant Name Date of Birth					
Gender: M F Other	Ethnicity: Caucasian	African American	Hispanic	Asian	Pacific Islander	Other
Parent/Guardian Name	·					
Address/City/State/Zip_						
Mobile Phone Number_						
Email						
undersigned acknowledges, The risk of injury to my child from personal discipline may reduce this: 1. For myself, spouse, child, and below) or others, and assume 2. I willingly agree to comply a participation and/or in the pro 3. I myself, my spouse, my child shareholders, partners, lessee advertisers, ("Releasees"), wit in these programs, whether ar	HROUGH TENNIS FOUNI understands, appreciates, an the activities involved in these progrisk, the risk of serious injury and/or d family members, I knowingly and full responsibility for my child's par with the program's stated and custo gram itself, I will remove my child fd, and on behalf of my/our heirs, asses, lessors, representatives, owners the respect to any and all injury, disabising from the negligence of the rele-	DATION or SOBECKS d agrees that: ams is significant, including the death does exist; and, freely assume all such risks, ticipation; and, mary terms and conditions for more the participation and bringings, personal representatives of premises or facilities, offility, death, damages, liabilities asses or otherwise, to the fulle	repotential for puboth known and reparticipation. If g such attention of and next of kin, I cials, agents, em, or loss or damag st extent permitte	er manent of unknown, f I observe of the neare hereby rele unployees, v te to person d by law.	disability and death, and we even if arising from the near any unusual significant of the st official immediately; and ase and hold harmless CC olunteers, other participator property incident to my	ENNIS CLUB (CCTC) the hile particular rules, equipment, and egligence of the Releasees (defined concern in my child's readiness for d, TC; its directors, officers, members, nts, sponsoring agencies, sponsors, child's involvement or participation
and all liabilities incident to n I, the parent/guardian, assert understands this Agreement. If any term, covenant, conditi	child, and on behalf of my/our heirs, ny involvement or participation in the that I have explained to my child/w on, or provision is held by a court of o way be affected, impaired, or inval	ese programs, even if arising f vard: the risks of the activity, f competent jurisdiction to be	rom their neglige his/her responsib	ence, to the pilities for	fullest extent permitted by adhering to the rules and	law. regulations, and that my child/ward
AGREEMENT, FULLY	POUSE, AND CHILD/WA UNDERSTAND ITS TER IT FREELY AND VOLUM	MS, UNDERSTAND	THAT WE	HAVE	GIVEN UP SUB	
(PARENT/GUARDIAN	SIGNATURE)	(PRINT NAME)				ate

UNDERSTANDING OF RISK I understand the seriousness of the risks invegulation, and accept them as a participant		rsonal responsibilities for adhering to rules and
(PARTICIPANT SIGNATURE)	(PRINT NAME)	Date
(PARTICIPANT SIGNATURE)	(PRINT NAME)	Date
(PARTICIPANT SIGNATURE)	(PRINT NAME)	Date
		e and use photographs and/or video taken for nline. I am aware that I am not entitled to
(PARENT/GUARDIAN SIGNATURE)		Date