



2022-REGISTRATION FORM

Tennis Camp @ Aurora Community Tennis Club

Please complete BOTH sides of this form.

The waivers on the reverse MUST be completed and signed by the parent/guardian prior to the first day of camp otherwise participation in the camp will not be permitted.

Return completed registration in person or scan / email to jordanmaster@hotmail.com

Campers are to bring their own snacks (**peanut- free**) and drinks (water recommended).

****Please note: Fees are reduced for Club members, but *Club membership is not required to participate* – ALL ARE WELCOME!**

Camper's Name: _____

Camper's Date of Birth _____

Medical Conditions / Allergies (if any): _____

Parent / Guardian Name: _____

Home phone / Cell phone: _____

Address: _____

City: _____

Postal Code: _____

E-mail: _____

Emergency Contacts: _____

Name of person(s) authorized to pick up your child: _____

Payment Method: Cash Cheque e-transfer by email

Please make cheques payable to "Jordan Master"

Amount: \$ _____



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Sessions and Fees

Fees	Non-Member	Member
Weekly Rate	\$230	\$215
Drop-in rate/day	\$50	\$47.50
4 Day weekly rate	\$185	\$175

Please select the weeks you would like to register for (*denotes 4 day week)		
Week		
1	July 4-8	<input type="checkbox"/>
2	July 11-15	<input type="checkbox"/>
3	July 18-22	<input type="checkbox"/>
4	July 25-29	<input type="checkbox"/>
5	August 2-5 **	<input type="checkbox"/>
6	August 8-12	<input type="checkbox"/>
7	August 15-19	<input type="checkbox"/>
8	August 22-26	<input type="checkbox"/>
9	Aug 29-Sep 2	<input type="checkbox"/>

Waiver of Release and Liability

I, the undersigned Parent or Guardian hereby irrevocably waive any and all claims against the Aurora Community Tennis Club (ACTC), Jordan Master (Club Pro), and its directors, instructors, volunteers, guests and the Town of Aurora. I release all of them from any and all liability for any loss, damage, expenses or personal injury, including death, that they or their family may suffer, whether due to negligence or otherwise in connection with any activities, programs or events provided, sponsored or organized by or on behalf of ACTC.

Parent/Guardian Signature: _____

Date: _____

Image/Photo Release Waiver

I grant ACTC and its Club Pro Jordan Master the right to take photographs and video of me and/or my children in connection with ACTC programs and to use such photographs for purpose of ACTC publicity, illustration, advertising, and web content.

Parent/Guardian Signature: _____

Date: _____