



BRIGHTON HIGH TENNIS CAMPS ARE HERE!

Camp Date	Times for the camp	Who can sign up?
M - F June 19 - 23	9:00 - 10:30am	Ages 4 yrs to 8 years old
*Students must be registered by June 15 th . If classes are too small, they will be cancelled so get all your neighbors to sign up!	10:30 - noon	Ages 9 yrs to incoming 9 th graders (13/14 years old)

Cost: \$60 for the week

Participants will be grouped by ability level and by ages if possible.

All participants need to have their own racket and wear tennis type shoes with no black soles.

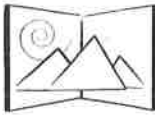
Water & small treat will be provided each day of the camp.

Each participant will receive a camp t-shirt

How to register:

- 1-Fill out the back of this form
 - 2-take to the main office of Brighton High School
(main office hours: M-Th 7:00am - 2:00pm)
 - 3-pay the fee (\$60 for the week)
 - 4- go to Brighton's tennis courts on your assigned days
tennis courts are just East of Brighton High School on Bengal Blvd.
- email questions to: natalie.meyer@canyonsdistrict.org





CAMP/CLINIC REGISTRATION INFORMATION

DATES June 19-23 (Monday through Friday)
TIME & AGES 9-10:30am (Ages 4 to 8) 10:30-noon (Ages 9 to 14)
COST \$60
LOCATION Brighton High Tennis Courts
STAFF Coach Natalie Meyer and Brighton Tennis Teams - Boys/Girls

Make checks payable to: Brighton High School **For More Information Call:** (email) natalie.meyer@canyonsdistrict.org
Send registration information form and fee to:
pay and bring form to main office at Brighton High School

*Revenue exceeding costs associated with the camp or clinic will be deposited in the team's club account at the school.

Name of Camp/Clinic: <u>Brighton High Tennis Camp</u>		Date: <u>June 19-23 2017</u>	
Name of Participant:		M: <input type="checkbox"/> F: <input type="checkbox"/>	
Last		First	
Address			
City:		State:	Zip Code
Name of Parent or Guardian			
Telephone Numbers		(Home)	(Cell)
Birth Date	Age	School Grade in Fall	
In case of Emergency, please notify			Phone #

Circle t-shirt size: youth - s m l xl Adult - s m l xl

INFORMED CONSENT/WAIVER OF LIABILITY

- RELEASE AND INDEMNIFICATION:** I hereby recognize and acknowledge that my/my child's participation in recreational activities may involve bodily and/or emotional injury to myself and/or my child. In consideration of my/my child's participation in such events, I, for myself, my child, my heirs, my executors and administrators, I hereby voluntarily and knowingly indemnify and hold harmless, defend, release, waive and discharge Canyons School District, _____, and its officers and employees and volunteers from any and all suits, claims, liability, including negligence, based on any injury except those caused solely by the willful misconduct of Canyons School District employees. In addition, I agree that I or my insurance company will pay for medical, hospitalization or any other expenses resulting from my/my child's participation.
- REFUND POLICY:** Canyons School District may withhold 25% of the refund (program registration fee) for administrative costs. All refunds must requested in person, accompanied with a written refund request. No refund shall be given after the first day of the program.
- COLLECTIONS:** I agree to pay Canyons School District all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection.
- EMERGENCY TREATMENT:** I hereby authorize Canyons School District, _____ and _____ staff to act on my behalf in accordance with their best judgment in case of an emergency involving me/my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise there from.
- EQUAL OPPORTUNITY:** Canyons School District provides equal opportunity to participate regardless of race, creed, gender, and will, upon request, provide reasonable accommodations to individuals and disabilities.

By signing this assumption of risk, liability release, indemnification and refund policy statement, I acknowledge that I have read it contents disclosure, that I understand its contents and disclosure, and that I agree to its terms.

Signature of Participant

Signature (Parent or Legal Guardian)