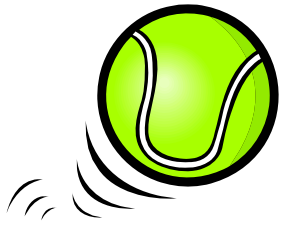
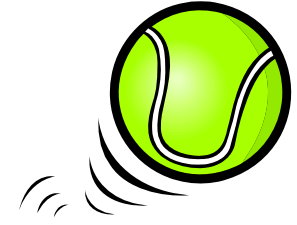


LONG BRANCH RECREATION  
YOUTH TENNIS PROGRAM



HELD AT THE  
NEW SHREWSBURY RACQUET CLUB



SUNDAYS - 6:00 PM TO 7:30 PM

SUNDAY, JAN. 6, 2019- Feb. 10, 2019  
(No Class February 3, 2019)

LESSONS GIVEN BY CERTIFIED PTR MASTERS INSTRUCTOR AND NEW  
JERSEY HALL OF FAME COACH, PATRICIA OUELLETTE

YOUTH MUST REGISTER TO PARTICIPATE.  
LIMITED SPACE AVAILABLE. FIRST COME BASIS.

**Ages from 7 years to 15 years of age**

Registration Fee: \$60.00

Register at 231 Wilbur Ray Ave, Long Branch, NJ

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ AGE: \_\_\_\_\_

PARENT'S SIGNATURE \_\_\_\_\_

CALL THE LONG BRANCH RECREATION DEPARTMENT AT  
732-571-6545 FOR FURTHER INFORMATION.

**THIS FORM MUST BE SUBMITTED ON-SITE FOR EACH PLAYER OR HE/SHE WILL NOT BE PERMITTED TO PLAY**

Participant Information

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

Address: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Parent Information PLEASE PRINT CLEARLY

Parent Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Information

Any Restrictions/ Conditions? \_\_\_\_\_

Any Medications being taken? \_\_\_\_\_

Does player use an inhaler? \_\_\_\_\_

**ANY PLAYER REQUIRING THE USE OF AN INHALER MUST HAVE IT WITH HIM/HER AT ALL TIMES!**

PERSISSION TO PARTICIPATE

PARENTAL/ GUARDIAN SIGNATURE: My signature indicates that I am aware that there are certain risks of injury in sports participation and that my child is in good physical condition with no illnesses or other conditions which preclude his/her participation in the tennis program. In addition, I agree to waive, release, hold harmless, Hot Shot Kids Tennis Clubs, Inc., New Shrewsbury Racquet Club, the City of Long Branch, their officers, coaches, sponsors, supervisors, and representatives for any injury suffered in the normal course of participation in the tennis program and its associated activities whether the result of negligence or any other cause.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_