



FREE 2011 FREE
KIDS FREE TENNIS CLINIC
Saturday May 21 and Wednesday May 25, 2011
@Dan Ramras Community Tennis Courts – behind Mary Siah Center
and
first day of North Pole session, Wednesday June 1, 2011
@ North Pole High Schools tennis courts

Presented by the FTA in cooperation with the FNSB Parks & Rec. Dept.

No advance registration required

Player's Name: _____ Male / Female

Address: _____ Phone 1: _____

_____ Phone 2: _____

E-mail address: _____ Date of birth: _____ Age: _____

School: _____ Attended previous clinics? YES/NO Loaner racquet required? YES/NO

Do you have any medical or health conditions/disabilities that we should know about? YES/NO

If yes, brief outline: _____

<p>Age Groups & Times- Fairbanks May 21 (Saturday)</p> <p><input type="checkbox"/> Grade K-2.....10:00 am – 11:00 am</p> <p><input type="checkbox"/> Grade 3-5..... 11:30 am – 12:30 pm</p> <p><input type="checkbox"/> Grade 6-8.....1:00 pm – 2:00 pm</p> <p><input type="checkbox"/> Grade 9-12..... 1:00 pm – 2:00 pm</p>	<p>Age Groups & Times- Fairbanks May 25 (Wednesday)</p> <p><input type="checkbox"/> Grade K-2.....10:00 am – 11:00 am</p> <p><input type="checkbox"/> Grade 3-5..... 11:30 am – 12:30 pm</p> <p><input type="checkbox"/> Grade 6-8.....1:00 pm – 2:00 pm</p> <p><input type="checkbox"/> Grade 9-12..... 1:00 pm – 2:00 pm</p>	<p>Age Groups & Times- North Pole June 1 (Wednesday)</p> <p><input type="checkbox"/> Grade K-2.....9:00 am – 10:00 am</p> <p><input type="checkbox"/> Grade 3-5.....10:00 am – 11:00 am</p> <p><input type="checkbox"/> Grade 6-8.....12:00 pm – 1:00 pm</p> <p><input type="checkbox"/> Grade 9-12.....11:00 am – 12:00 pm</p>
<p>Tennis Shoes Required!! No Sandals. No bare feet.</p>	<p>Releases</p>	<p>Tennis Experience:</p> <p><input type="checkbox"/> None <input type="checkbox"/> Some</p>

Participation and medical consent:

I, the parent/guardian of registrant, a minor, give my approval for him/her to participate in any and all FTA Tennis activities; I assume all risks and hazards incidental to my child's participation and I do hereby waive, release, absolve, indemnify and agree to hold harmless, the organizers, volunteers, participants, and other persons, for any claim arising out of any injury to my child, whether the result of negligence or for any other cause. In the event of any medical emergency, I request that I be immediately called at the telephone listed below. If I am not available, I hereby give my consent, in the event of injury or illness, for emergency medical treatment, hospitalization, or other medical treatment as may be necessary for the welfare of the above named youth, by a physician, qualified nurse, certified medical athletic trainer, and/or hospital during all periods of time in which the youth is away from his/her legal residence. Further I hereby waive, on behalf of myself and the above named youth, any liability arising out of such medical treatment.

I give my consent for the use of photographs of my child for all FTA publicity, including for the FTA website and newsletter, and for FTA releases to the public media.

Yes _____ No _____

If there are any health or physical limitations, please explain on back of the white copy of this form.

Parent/Guardian Name (Print)

Signature

Emergency Phones

Date

For information call 455-4301 or Email: info@fairbankstennis.org