

# Tennis Lessons

June 6 – June 29, 2016

Ages: 6 – 14

\$40.00/per child

Name \_\_\_\_\_  
\_\_\_\_\_                      First                      MI                      Last                      Age                      M/F

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ E-mail Address \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_                      Street                      City                      State                      Zip Code

Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Circle one:    8am – 9am                      or                      9:15am – 10:15am

I, THE UNDERSIGNED, FOR MYSELF, MY CHILD, EXECUTORS, ADMINISTRATORS, PERSONAL REPRESENTATIVES, SUCCESSORS AND ASSIGNS, UNDERSTANDING THAT THE NIRD YOUTH TENNIS PROGRAM IS A POTENTIALLY HAZARDOUS ACTIVITY, WAIVE AND RELEASE ANY AND ALL RIGHTS, CLAIMS AND CAUSES OF ACTION I OR MY CHILD HAVE OR MAY HAVE AGAINST THE CITY OF NEW IBERIA AND THE NEW IBERIA RECREATION DEPARTMENT, AND THEIR VOLUNTEERS, EMPLOYEES, OFFICERS AND INSURERS, AND ANY AND ALL SPONSORS, REPRESENTATIVES AND SUCCESSORS, THAT MAY ARISE AS A RESULT OF MY CHILD'S PARTICIPATION IN THE NIRD YOUTH TENNIS PROGRAM, AND ANY CONSEQUENCES OF THAT PARTICIPATION.

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Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_