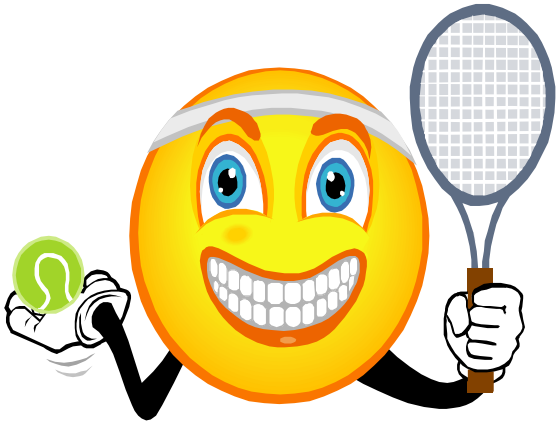
JUST YOUR STYLE!



SUMMER TENNIS PROGRAM

Taught by:

BONO SOMORROSTO

(Former #2 Tennis Player in New England!)

Thursdays, July 12 – August 16th (Aug. 23 = Rain Date)

Youth Age 8 and Up (Advanced players or adults with interest, contact the Recreation Dept.)

Beginner Youth Tennis Lessons

5pm – 6pm

For those with an interest but, perhaps, have never played! Students will be taught things such as basic strokes, game rules, and scoring.

Intermediate Youth Tennis Lessons

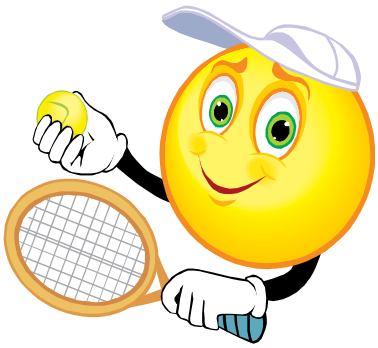
6pm – 7pm

For those with a little experience, knowledge of the basics, and looking to improve!

$65pp – Pre-payment required at registration

To register, complete the registration form and submit with payment to the Parks & Recreation Department, 330 Main Street, Hopkinton. Registrations can also be dropped off to the Hopkinton Town Hall or the Slusser Senior Center. If you have any questions, please call or email the Recreation Department. Checks can be made out to the Town of Hopkinton. Minimum registrations required to run program.

Sponsored By:
HOPKINTON PARKS & RECREATION DEPARTMENT
330 Main Street, Hopkinton
603-746-2915
parkrec@tds.net



REGISTRATION FORM

(One registration form per person per program please)

Program Choice: (circle) Beginner Tennis Intermediate Tennis

PARTICIPANT INFORMATION *(Please Print)*

Name _____Age_____ M / F

Date of Birth_____ Grade (fall 2012)_____(if applicable)

Address_____

Phone (Hm) _____(Wk)_____(Cell)_____

PARENT / GUARDIAN: (Complete this section for participants 17 years old and younger)

Name_____

Address (if different*)* _____

Email (please print) _____

Phone (Hm) _____ (Wk) _____(Cell)_____

ALTERNATE EMERGENCY CONTACT:

Name_____Relationship_____ Phone: _____

Name_____Relationship_____ Phone: _____

Waiver and Release of Liabilities

Participation in the Tennis Program may involve risk of injury, which may include, but is not limited to sprains, bruises, insect bites, torn muscles, broken bones, eye & head injuries, and/or death. As a parent or guardian, or as a willing participant, I attest and verify that I have full knowledge of all risks involved and that my child, and/or self, is physically fit to participate in the Tennis Program. I hereby for myself, my heirs, executors, and administrators waive and release all rights and claims against the Town of Hopkinton, its officers, agents, employees, and volunteers, except in the case of their sole negligence, from all losses, injury, damages, fees, and other expenses arising out or in connection with participation. In addition, I give my permission for my child and/or myself to be treated by qualified medical personnel in the event that I cannot be reached at the phone numbers provided or am incapable of making this decision myself.

PARTICIPANT'S FULL NAME (please print)_____

PARENT/GUARDIAN SIGNATURE_____

PARENT/GUARDIAN PRINTED NAME_____

DATE _____

PHOTO RELEASE

I hereby grant Active Jr. and the Town of Hopkinton permission to use my child's photograph, video picture, and/or other digital reproduction of him/her or other reproduction of his/her physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the Internet or other Recreation Department materials.

Please Check: ___Accept ___Decline

PARENT/GUARDIAN SIGNATURE_____