

**2009 PROSPERITY TENNIS CAMP**  
*In Partnership with Newberry County Recreation*

**FUNDAMENTAL CAMP FOR AGES 4 YEARS OLD – 99 YEARS OLD**

**DATE: June 23, 24, & 25, 2009**

**TIME: 8:30 am -9:30 am Ages 4-10 years old**

**TIME: 9:45 am - 10:45 am Ages 11- up**

**COST: \$25.00 – PER STUDENT**

**WHERE: PROSPERITY TENNIS COURT**

**DEADLINE TO REGISTER: June 19, 2009**

**FORMS CAN BE TURNED INTO THE TOWN CENTER OR MAILED TO**

TOWN OF PROSPERITY

PO BOX 36

PROSPERITY, SC 29127

**WHAT TO BRING**

**Tennis Racquet**

**Campers should come dressed for tennis.**

**NAME:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **Circle One: Male/Female**

**Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_ **Emergency Phone** \_\_\_\_\_

I acknowledge that there are certain risks of physical injury to participants in this program and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I/my child may sustain as a result of participation. I further agree to waive and relinquish all claims I/my child may have as a result of participating in this program against Newberry County, Town of Prosperity, its officials, agents, volunteers, sponsors, and employees.

If I/my child is injured, becomes ill, or needs medical attention for any reason, this authorizes program staff to assist me/my child and to call for medical assistance. My child will be transported to the nearest medical facility decided by emergency personnel unless instructed otherwise in writing by parent. I understand I am responsible for all costs incurred in any such medical emergency.

I have read and fully understand this waiver and release.

**PARENT OR LEGAL GUARDIAN SIGNATURE** \_\_\_\_\_

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**DATE** \_\_\_\_\_

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| <b>For Office Use Only: Date Paid</b> _____ <b>Cash</b> _____ <b>Check#</b> _____ |
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