



## **2021 Bellport Tennis Camp Registration Form**

Please use a separate form for each child participating

Please check the appropriate class for your child:

- \_\_\_\_\_ Beginners- 5-7 years old and under – Class meets from 12:50pm – 2:00pm      \$120.00 per session
- \_\_\_\_\_ Advanced Beginners – 8-10 years old – Class meets from 1:50pm – 3:00pm      \$120.00 per session
- \_\_\_\_\_ Intermediate & Advanced 11 through 18 years old – Class meets from 2:50pm - 4pm \$120.00 per session

Check which sessions you would like. (You can register for as many sessions as you would like)

### MONDAY - THURSDAY

- \_\_\_\_\_ Session 1: July 5 -8                      \_\_\_\_\_ Session 2: July 12-15                      \_\_\_\_\_ Session 3: July 19-22
- \_\_\_\_\_ Session 4: July 26-29                      \_\_\_\_\_ Session 5: August 2-5                      \_\_\_\_\_ Session 6: August 9-12

Number of sessions \_\_\_\_\_ times price per session \$ \_\_\_\_\_ = \$ \_\_\_\_\_ Amount Enclosed \$ \_\_\_\_\_

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

Childs Age: \_\_\_\_\_ Childs Date of Birth: \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

Parents/ Legal Guardians Names: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Does your child have any allergies? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Please explain: \_\_\_\_\_

I hereby authorize and approve my child’s participation in the recreation program sponsored by the Village of Bellport. I know of no physical disabilities or illnesses which would interfere with my child’s participation in this program. As parent/guardian of \_\_\_\_\_ (“participant”) I do hereby agree that participation in any Village-sponsored recreation/camp program will be at the participant’s own risk. I further agree to release the Incorporated Village of Bellport, including their respective officers, elected officials, servants, agents and employees from any and all claims for damages due to personal injury and loss or damage to property from any cause whatsoever sustained by myself or the participant in connection with the Village-sponsored recreation/camp program. I understand that no expenses or implied warranties have been made by the Village as to the fitness for use of the supplies, equipment, and facilities used in conjunction with any Village sponsored recreation program.

Parents Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE MAIL THIS FORM WITH PAYMENT OR DELIVER IT IN PERSON TO:**

**Bellport Village Hall  
29 Bellport Lane, Bellport NY 11713**