

LEVEL

Please provide the following camper information:

Name _____

DOB _____

Gender _____

Years been playing _____

Level: ___ Beginner ___ Intermediate ___ Advanced

Parents Names: _____

Address _____

Email _____

Cell _____

Health issues _____

I/WE, the parents of _____ hereby release LEVEL7 TENNIS CAMP, it's agents, owners and employees from any claims for accident, injury or loss of valuables that may occur during my/our child's camp visit. My/our signature below acknowledges my/our release and waiver of any claim for damages from any such accident, injury or loss.

Parent's Signature

Date
