



**Junior Team Tennis Registration  
2017 Spring Season (Ages 8-14)  
Tom Brown Park  
Begins February 25<sup>th</sup> (6 weeks)**

**Name of Player** (print) \_\_\_\_\_

**Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_      **T-Shirt Size (circle)**    S   M   L   XL

**Gender:** Male \_\_\_\_ Female \_\_\_\_

**School:** \_\_\_\_\_

**Registration Fee:** \$55.00 (\$50.00 Early Registration if received by December 1st)  
Check \_\_\_\_ Cash \_\_\_\_ Credit card at Forestmeadows \_\_\_\_

**Full Address:** \_\_\_\_\_

**Phone Numbers:** home (    ) \_\_\_\_ - \_\_\_\_    cell: (    ) \_\_\_\_ - \_\_\_\_

**Emergency contact::** \_\_\_\_\_ **Phone:** \_\_\_\_\_

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

**USTA Member?** Yes \_\_\_\_ No \_\_\_\_    **Member Number if yes:** \_\_\_\_\_

**Current Level of Play:** Orange Ball \_\_\_\_ Green Ball \_\_\_\_ Yellow Ball \_\_\_\_

**Parent(s) Name(s)** (Print) \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

*For questions, please call George English at 850-510-6585 or Glen Howe at 850-891-4979.  
**english@ustafloida.com** or **Glen.howe@talgov.com***

**Rainout makeups on Sunday @ 2:00 p.m.**

**Consent:** It is understood that participation in sports may cause injuries. It is also agreed by my signature below that in the event I or my child is disabled, injured or incurs a disease of a temporary or permanent nature while participating, to waive all claims or liabilities against the City of Tallahassee, coaches, and the Parks, Recreation, & Neighborhood Affairs. The Parks, Recreation, & Neighborhood Affairs Department reserves the right to photograph/videotape facilities, activities, and program participants for potential future use. All photos/footage will remain the property of the department and may be used for publicity or promotion purposes only.

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