



The Seal Beach Tennis Center is getting ready for the Fall USTA Junior Team Tennis season Ages 10-17 years old. Sign up now and we will organize the teams. Whether you are just beginning to compete, or want the competition in the off season of your high school tennis season, USTA Junior Team Tennis is the place to play. Teams will play in divisions based on their age and skill level and face off against other teams in the area. We will be having team practices on Fridays from 4:00pm-6:00pm. Matches will be played on Saturday afternoons.

Team Practices will begin on Friday, September 18, 2015

Season begins Saturday, September 26, 2015

cost:

USTA Junior Team Tennis Summer Season: \$165

(this includes team t-shirt and Friday practice)\*

\*Players must be a USTA member and sign up online for the team they are on.

For league rules and sign up, visit [www.orangecountyusta.com](http://www.orangecountyusta.com),

go to USTA JR Team tab.

For any questions please contact Brenda Danielson 714-345-0945 / [bdanielson@sealbeachtenniscenter.com](mailto:bdanielson@sealbeachtenniscenter.com)

SEALBEACHTENNISCENTER.COM



# CLASS REGISTRATION FORM

ADULT NAME: \_\_\_\_\_  
LAST NAME FIRST NAME

E-MAIL: \_\_\_\_\_

ADDRESS: STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: HOME # \_\_\_\_\_ WORK# \_\_\_\_\_ MOBILE # \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE # \_\_\_\_\_

Drivers License #: \_\_\_\_\_ EXP DATE: \_\_\_\_\_

Check if address or phone number has changed (For returning participants only)

| PARTICIPANT FIRST NAME | LAST NAME | BIRTH DATE | CLASS # | CLASS TITLE | START DATE | FEE \$    | Office Use Only<br>ACCOUNT # |
|------------------------|-----------|------------|---------|-------------|------------|-----------|------------------------------|
|                        |           |            |         |             |            |           |                              |
|                        |           |            |         |             |            |           |                              |
|                        |           |            |         |             |            |           |                              |
|                        |           |            |         |             |            |           |                              |
|                        |           |            |         |             |            |           |                              |
|                        |           |            |         |             |            |           |                              |
| <b>TOTAL</b>           |           |            |         |             |            | <b>\$</b> |                              |

## RELEASE AND INDEMNIFICATION

I hereby agree to indemnify, defend and hold harmless the City of Seal Beach, its officers and class agents and volunteers from and against any and all claims, damages, liability, bodily injury, death, expenses, and judgments, including attorney fees, expert witness fees and court costs in any way arising from my, or my child's participation in the program for which I am registering him/her. I understand and am familiar with the nature of the event or activity and recognize that this event or activity can be dangerous to me (or my child) and accept those dangers. In case of emergency, I give my permission for emergency medical treatment, also give my permission to the City of Seal Beach to photograph me or my child participating in this event or activity, for advertising purposes for the City of Seal Beach and acknowledge I will not receive any compensation for such use. My signature acknowledges that I understand and agree to the above conditions.

DATED: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
PARTICIPANT/PARENT OR GUARDIAN

### METHOD OF PAYMENT

MAKE CHECK PAYABLE TO CITY OF SEAL BEACH

CHECK #: \_\_\_\_\_ CHECK DATE: \_\_\_\_\_

CASH

VISA  MASTERCARD

CARD #     -     -       EXP. DATE   -

SIGNATURE \_\_\_\_\_ TOTAL CHARGED TO ACCT: \$ \_\_\_\_\_