



# Pacific Sands Cabana Club Tennis Academy Registration

## 2017 Fall Tennis Session

Name:	Home Phone: Cell Phone:
Address:	City:
Zip Code:	E-mail:

Activity Name	Day	Time	Participant Name	Birth Date	Gender	Fee

Please Remit Payment to:

PSCC  
 8141 Atlanta Avenue  
 Huntington Beach, CA 92646  
 Phone: 714-536-8091  
 manager@cabanaclubhb.org

Session as follows:

**September 11 - November 17, 2017**

Date Registered:	PSCC Member: Yes No
Payment Method: Check Cash Credit	Receipt #:

The above named participant has my permission to participate in the activity indicated above. I agree to observe and obey all posted rules and warnings and further agree to follow any oral instructions or directions given by the employees, representatives or agents of PSCC. I recognize there a certain inherent risks associated with the above described activity and I assume full responsibility for personal injury to myself or participant above. I realize every precaution is taken to eliminate any injuries or hazards and that a competent adult is present; however, in the event of an injury I hereby waive, release and hold harmless from any liability for damages or claims for damages for personal injury, emotional distress, illness, disability, and accidental death, as well as, from claims for property damage which may arise in connection with the above named activity, against the Pacific Sands Cabana Club and its employees, agents, or representatives.

Registration also constitutes permission for the Pacific Sands Cabana Club to take and use any photograph, video, film or other images of the above named participant and/or legal guardian in any promotional materials without compensation, copyright or other rights to the images of above named participant and/or legal guardian of the above named participant for such use.

Date: \_\_\_\_\_ Signature Guardian/Participant: \_\_\_\_\_