



**GLASGOW RECREATION DEPARTMENT  
YOUTH TENNIS PROGRAM**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Grade: \_\_\_\_\_ School: \_\_\_\_\_ Years Experience: \_\_\_\_\_

Parent/Guardians Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: Day: \_\_\_\_\_ Night: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Insurance? Yes \_\_\_\_\_ No \_\_\_\_\_ T-Shirt Size: YS 6-8 YM 10-12 YL 14-16

*If yes, please list:* \_\_\_\_\_ (circle one) AS AM AL AXL

I/We, the parent(s) or guardian(s), give our permission for our child to participate in the Glasgow Rec. Department's Summer Tennis Program. Furthermore, we hereby hold harmless and indemnify the Glasgow Rec. Dept., the City of Glasgow, and all employees, instructors, volunteers, and officials from any claims, damages, losses and injuries that may be incurred by the participant during the tennis program, while traveling to and from the tennis program, and while waiting for and after the tennis program, from and against any personal injury, loss of life, property and/or damage to property sustained in or about the premises, and from and against all costs, expenses and liability incurred in and about any such claims, the investigation thereof or the defense of any action or process brought thereon and from and against any orders and/or judgments that may be entered therein. I/We also agree to abide by all rules and regulations promulgated by the Glasgow Rec. Dept. and the Summer Tennis Program. I/We further attest and verify that my/our child is physically fit and sufficiently trained for participation in group tennis activities at the Summer Tennis Program. Further, by signing this form, I/we are giving the Glasgow Rec. Dept. permission to use photographs of participants for publicity purposes.

\_\_\_\_\_  
Signature of parent/guardian Date

Please make checks payable to the Glasgow Recreation Department. The fee for the summer tennis program is \$20 per session for the first child in a family & \$15 per child for any additional children from the family participating in the program.

Paid -- Date \_\_\_\_\_ Check Amount \_\_\_\_\_ Cash Amount \_\_\_\_\_