# 2023 Fall MIDDLE SCHOOL TENNIS REGISTRATION



Spearfish Tennis Association

Please Print – must complete waiver and media release on back

PARTICIPANT INFORMATION							
Name:			Date of Birth:				
Gender (Please Circle):	Male	Female	Age:		Grade:		
The Spearfish Tennis Association is running Middle School tennis program Monday through Friday							
starting August 14, 3:30pm-5:00 pm. Since MS Tennis is not an official Spearfish Middle School							
sport, we do need to charge \$30 (\$25 for STA members) plus the T-Shirt cost. The Spearfish Tennis							
Association would like you to complete the following.							
If you DO NOT yet have a t-shirt, you will need to purchase one.							
T-Shirt Size: YouthM,	L,XI	_ A	dultS,	M,L	.,XL,	2XL,3XL	
Cost \$10.00 add \$2.00 for 2XL and \$3.00 for 3XL							
Please contact Joe Doerges if you have any questions.							
jdoerges@me.com or phone 591-0664							
Which Best Describes your tennis experience? (Please check one)							
Never PlayedPlay, but not oftenPlayed previously, but stoppedPlay					Play frequently		
Please list any Medical Conditions or Behavioral Concerns the staff should be aware of:							

PARENT/GUARDIAN INFORMATION					
Parent/Guardian Name:					
Address:	Primary Phone:				
	Secondary Phone:				
	Email:				

EMERGENCY CONTACT INFORMATION				
Primary Emergency Contact	Secondary Emergency Contact			
Name:	Name:			
Relationship:	Relationship:			
Primary Phone:	Primary Phone:			
Secondary Phone:	Secondary Phone:			

I DO \_\_\_\_\_ I DO NOT (please check one) authorize the Tennis Lesson Staff to release my child at the end of the recreation activity without a parent/guardian present. In some instances, an activity will conclude before the scheduled time. Some children would like to leave. We want you to tell us if it is okay for your child to leave the tennis facility without a parent/guardian present (DO), or should we keep the child under our supervision until the end of the scheduled time period (DO NOT).

			-
Donation Type:	Cash	Check #	Amount: \$

Date:

Staff Name:

### **CONSENT FOR EMERGENCY CARE**

I, participant, or parent/guardian of the named participant, do hereby grant unto any medical doctor or hospital, my consent and authorization to render such aid, treatment or care to said participant as, in the judgment of said doctor or hospital, may be required on an emergency basis, in the event that the said participant should be injured or stricken ill while participating in this program.

#### PARTICIPANT NAME:

DOCTOR'S NAME:

PLEASE PRINT

PARTICIPANT SIGNATURE:

PARENT/GUARDIAN SIGNATURE:

IF PARTICIPANT IS UNDER AGE 18

OPTIONAL

#### RELEASE FROM LIABILITY – SPEARFISH TENNIS ASSOCIATION

I, the parent/guardian and or the registrant, agree that I, and the registrant will abide by the rules of the Tennis Lessons, its affiliated organizations and sponsors. Recognizing the probability of physical injury associated, and being cognizant of the basic safety rules for activities connected therewith, and in consideration of Tennis Lessons or its programs accepting the registrant for its programs and activities:

I hereby RELEASE, DISCHARGE AND OR OTHERWISE INDEMNIFY Tennis Lessons, its affiliated organizations and sponsors, their employees and associated personnel, including the Spearfish Tennis Association, its agents and employees as the owners of the facilities utilized against any claim by or on behalf of the guest, the guests registrant's enrollment and participation in the Tennis Lessons programs which may result in injury, death or other damages to the registrant or the registrant's family, heirs or assigns.

In consideration of the registrant being allowed to enroll and participate in Tennis Lessons, I hereby personally assume all risks in connection with said participation, and I further **RELEASE** the aforementioned Tennis Lessons and its programs, its affiliated organizations and sponsors, their employees and associated personnel, including the Spearfish Tennis Association, its agents and employees as owners of the fields and the persons mentioned, for any harm, injury or damage which may befall the registrant while a participant in the Tennis Lessons and its programs including all risks connected therewith, whether foreseen or unforeseen.

I, further state that I am of lawful age (and or the parent/guardian of the registrant) and legally competent to sign this affirmation and release; that I understand the terms herein are contractual and not a mere recital; and that I have signed this document as my own free act and on behalf of myself or my child. This Release and indemnity agreement shall be binding upon the registrant and me, and our heirs, personal representatives, agents, successors and assigns.

I HAVE FULLY INFOMRED MYSELF AND OR MY CHILD OF THE CONTENTS OF THIS AFFIRMATION AND RELEASE BY READING IT BEFORE I SIGNED IT. I UNDERSTAND THE TERMS OF THE RELEASE AND AGREE TO ABIDE BY THEM. I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE RELEASE.

I have executed this release at Spearfish, South Dakota on

\_\_\_\_\_/\_\_\_\_/\_\_\_\_\_

I HEREBY AGREE TO ABIDE BY THE SPEARFISH TENNIS ASSOCIATION, PROGRAM POLICIES & PROCEDURES:

## PARTICIPANT

SIGNATURE:

(Parent Signature needed if Participant is under age18)

#### MEDIA RELEASE FORM

IN CONSIDERATION OF the possible use of my photographs, interviews, name, image, spoken words, art works, performance and movement, or other creative productions (hereinafter referred to as "Works") by the Spearfish Tennis Association:

I hereby consent to and approve of the use and reproduction of my "Works" by the **Spearfish Tennis Association** and to the display, publication, distribution or exhibition of these "Works" for the purpose of publication or public viewing of any material that may be created by the **Spearfish Tennis Association** including without limitation, the **Spearfish Tennis Association** website.

I hereby waive any right to inspect or approve the finished publications whereas "Works" may be used now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of said "Works".

I hereby agree to release, defend, and hold harmless the **Spearfish Tennis Association** and subordinates, including any firm publishing and or distributing the finished product in whole or in part, whether on paper or via electronic media, from and against any claims, damages or liability arising from or related to the use of the "Works", including but not limited to distortion, blurring, alteration, optical illusion or use in composite form, either intentionally or otherwise, that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution.

YES, I give my consent NO, I do not give my consent

# Please check the appropriate box below which is applicable to your present situation:

I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions in writing prior to signing, and I agree that by signing below it will be interpreted as a free and knowledgeable acceptance of the terms of this release. This release shall be binding on my heirs, successors, and/or assigns.

\_\_\_\_\_I am **18 years of age or older** and I am competent to sign contract in my own name.

\_\_\_\_\_I am the parent or legal guardian of the below named individual.

PARTICIPANT SIGNATURE:

PARENT/GUARDIAN SIGNATURE:

DATE: \_\_\_\_\_