TENNIS



College Park Athletic Club

East: 2223 Half Day Rd, Bannockburn, IL 60015 West: 10 Marriott Dr, Lincolnshire, IL 60069 Phone - 847.948.5330 Fax - 847.948.0162 www.cpacweb.com

Last Name:				Email:			Date:		
Address:				City/Zip:					
Home Phone:				Cell Phone:					
Emergency Contact : _				Phone:					
* In an effort to price enrolled for future s									
Participant/s Name/s	D.O.B.	M/F	Session	Class	Day	Time	CPAC East / West	Fee	
Annual Junior Membership is require \$195 per student, \$97.50 for					ormance.	Junio	r Membership Fee :		
* 10% discount off total enrollmen				,	•	•	included. Total:		
For more information please cor	itact Maor Ziri	KIN, JF I	ennis Dire	ctor at 847-948-5330, email:	маог 2 ш срас	web.com			
Medical Concerns Please note any diet limitations, allergies, medications, or additional conditions which may affect participation.				Method of Payment (Must have payment in order to guarantee spot in class. In an effort to prioritize our current students, registered players will automatically be re-enrolled for future sessions within the current season. Players will receive prior notification.) House Charge (Please use credit card on file.) Credit/Debit Card*Visa, Mastercard, Discover (No AmEx) *Your credit card will be kept on file in our secure system allowing you to make purchases on your house charge account. Credit cards will be charged on the 1st and 15th of each month for outstanding balances. Card #					
PLEASE FILL OUT THIS FORM COMPLETELY AND SIGN THE PARTICIPANT WAIVER. THANK YOU.				(Parent, Guardian, A My signature indicate and conditions on th	dult Participa es I have rea	nt) d and agree	e with the terms		



PLEASE READ AND SIGN ON THE REVERSE SIDE

Please read this form carefully and be aware that by registering for and participating in this program(s), or by registering your minor child / ward for participation in this program(s), you will be waiving your rights and/or the rights of your minor child / ward to all claims for injuries you or your minor child / ward might sustain arising out of this program(s) and you will be required to indemnify, hold harmless, and defend the College Park Athletic Club and all the employees and agents of College Park Athletic Club for any claims arising out of participation in said program(s).

Credit Card Authorization

College Park Athletic Club membership includes access to a house charge account to be used for service and Pro Shop purchases during the month. The Electronic Funds Transfer (EFT) system retains Credit Card information that is processed at the end of each billing period to pay the balance on this account via Credit Card charge or Debit Card.

Risk of Injury

"As a participant in the programs of College Park Athletic Club, or as a parent or legal guardian of a participant under 18 years of age, I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of injuries, including death, damages, or loss which I may sustain as a result of participating in any and all activities and programs of College Park Athletic Club."

Waiver of Injury Claims

"I agree to waive and relinguish any and all claims I may have arising out of, connected with, or in any way associated with the activities and programs of College Park Athletic Club."

Release from Liability

"I do hereby fully release and discharge the College Park Athletic Club and its officers, agents, and employees from any and all claims from injuries, including death, damage or loss which I or my minor child / ward may have or which may occur on account of participation in the program."

Indemnity and Defense

"I further agree to indemnify, hold harmless and defend the College Park Athletic Club and its officers, agents, and employees from any and all claims from injuries, in- age for any electronic or non-electronic form or media for cluding death, damages and losses sustained by me or promotional purposes." my minor child / ward and arising out of, connected with, or in any way associated with the activities and programs I have read and fully understand and agree to the of College Park Athletic Club."

In the event of any emergency, I authorize College Park Athletic Club to secure from any licensed hospital, physi- Please sign on reverse side.

cian, and/or medical personnel any treatment deemed reasonable and necessary for my minor child's immediate care and agree that I will be responsible for payment of any and all medical services rendered.

Transportation Liability Waiver

"In consideration of my minor child/ward being allowed to be transported by automobile by a CPAC Staff member, as the Parent or legal guardian of a participant under 18 years of age, I recognize and acknowledge that there are certain risks of physical injury associated with being transported by automobile by a CPAC staff member. I agree to assume the full risk of injuries that may be sustained by any minor child/ward of mine, as a result of being transported by a CPAC staff member. I agree to waive and relinquish all claims on behalf of my minor child/ward that the minor child/ward may have against College Park Athletic Club as a result of the minor child/ ward's being transported by automobile by a CPAC staff member.

"I do hereby fully release and discharge College Park Athletic Club and its officers, agents and employees from any and all claims from injuries, damage or loss which I, or any minor child/ward may have or which may occur to my minor child/ward on account of his/her being transported by automobile by a CPAC staff member. I further agree to indemnify and hold harmless and defend CPAC, its officers, its agents and employees from any and all claims sustained by me or my minor child/ward, and arising out of, connected with, or in any way associated with being transported by automobile by a CPAC staff mem-

Promotional Release

"I hereby authorize College Park Athletic Club and any of its authorized agents to use my child's photographic im-

above Credit Card Authorization, Participant Liability Waiver and Hold Harmless Agreement.