



OHTC After-School Camp 2020



Please list all weeks you plan to attend _____

Session: Regular [] Hot Shots [] Days of the Week: Tue [] Wed [] Thur []

Last Name	First Name	Gender M/F	DOB	Cell Phone
Address		City	Zip	
Parent/Guardian	Mother	Father	Email	Cell Phone
Address		City	Zip	

Emergency Contact Name	Relationship	Phone Number		
Address		City	Zip	
Physician Name	Medical #	Phone		
Dental Name	Medical	Phone		
Allergies		Health Concerns	Injuries, Surgeries, Etc.	

Waiver of Liability

The undersigned camper agrees to abide by the rules and regulation of The Oakland Hills Tennis Club, ("The Club"). The undersigned camper also understands that the activities by the Club involve physicals risks of injury to him/herself and agrees that all use of The Club facilities shall not be liable for any claims, demand, injusies (mental, bodily or death) damages, actions or course of actions whatsoever, including nut not limited to the part of The lub, it's officers, agents or employees. Any campers not in good health, who choose to exercise, assume all risks. The camper for him/herself and on behalf of his/her executors, administration and assigns, does herby expressively forever waive, release and discharge The Club, its successors, and assigns as well as its employees, officers and agents for all such claims, demands, injuries, damages, actions or causes of actions.

Signature of Camper

Date

Signature of Parent/Guardian if camper is under 18

Date