



Martinsburg-Berkeley County Parks & Recreation

2019 Youth Tennis Camps

A: _____
 #: _____
 D: _____

Price: \$45 per child, per week
Instructor: Tracy Housden
Locations: Spring Mills Middle School Tennis courts
Levels: Beginner or Intermediate
Ages: 5-10 year old's
General Information: These youth clinics will focus on stroke orientation and drills to improve their skills on the tennis court. Space is limited to the first 10 in each session. Camps are held **Monday -Thursday**. In case of inclement weather, Fridays will be used as a make-up day or an indoor location may be available utilized. **Please bring your own racquet.**

BEGINNERS			INTERMEDIATE		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program #: 5801.2301 June 17-20, 2019 Time: 4-4:45p.m.	Program #: 5801.3101 July 8-11, 2019 Time: 4-4:45p.m.	Program #: 5801.3201 August 5-8, 2019 Time: 4-4:45p.m.	Program #: 5802.2301 June 17-20, 2019 Time: 5-5:45p.m.	Program #: 5802.3101 July 8-11, 2019 Time: 5-5:45p.m.	Program #: 5802.3201 August 5-8, 2019 Time: 5-5:45p.m.

Participant Name _____ Birth Date _____ Age _____

Address: _____

City _____ State _____ Zip _____

1st Phone: _____ 2nd Phone: _____

For text alerts: Cell # _____ Cell Carrier: _____
 (SPRINT, AT&T ETC)

Parent's (Guardian's) Name _____

E-Mail _____

Medical Concerns: _____

LIABILITY WAIVER: As the parent (legal guardian) of the above named minor, I grant permission for this minor to participate in all activities of this program. I assume all risks and hazards incidental to such participation, including transportation to and from such activities, and I do hold harmless the Martinsburg-Berkeley County Parks & Recreation Board, The Gateway Garden Club, any and all other volunteers, organizers, and participants for any claims arising out of injury to my child except to the extent and in the amount covered by the accident or liability insurance carried by such person.

MEDICAL RELEASE: I further grant permission for emergency first aid to be given to my child in the case of medical injury or emergency. If necessary, I grant permission for my child to be taken to the emergency room of a nearby hospital, and its staff has my authorization to provide treatment which a physician deems reasonably necessary for the well-being of my child.

PHOTOS: The Martinsburg-Berkeley County Parks and Recreation Board reserves the right to take pictures at all events and programs. Pictures may be displayed in future Parks and Recreation brochures and publications.

REFUND POLICY: Martinsburg-Berkeley County Parks and Recreation will give full refunds only for programs/leagues we are unable to offer.

INCLEMENT WEATHER: Please check our website www.mbcparcs-rec.org or Facebook for information on updates, upcoming programs, leagues cancellations or changes.

By signing below, you indicate that you have read, understand and agree to the above mentioned waiver and release information. You also indicate that you are the child's parent or legal guardian.

Parent/Guardian Signature: _____ Date: _____



Please be sure the application is signed by a parent or guardian and mailed to Martinsburg-Berkeley County Parks & Recreation, 273 Woodbury Avenue, Martinsburg, WV 25404 OR 40 Excellence Way, Inwood, WV; or dropped off at either office during business hours listed below. You may also register [HERE](#) at our website: www.mbcparcs-rec.org (click 'Register' at the top of the page). Please note there is a small merchant fee for use of credit/debit cards online and in person. For more information contact Parks & Recreation at 264-4842 (Berkeley 2000 Office in Martinsburg) Monday-Friday, 9AM-5PM or 229-0022 (Randy Smith Center Office in Inwood) Monday-Friday, 2PM-5PM.