

SUMMER 2021

University Club Tennis & Swim Camps

Full Day Camps:

\$230 per person
(Lunch included)
M 9:00 – 11:30am
T – F 9:00 – 3:00pm

Half Day Camps:

\$145 per person
M – F 9:00 – 11:30am

Sessions:

1. May 24 – May 28
2. May 31 – June 4
3. June 7 – June 11
4. June 14 – June 18
5. June 21 – June 25
6. June 28 – July 2
7. July 5 – July 9
8. July 12 – July 16
9. July 19 - July 23
10. July 26 - July 30

Registration Deadline:

Friday Before Session Begins

To Register:

Call Ray Anders at 225-773-1026 and drop the registration form and payment off at the Sports Complex Pro Shop.

*Note: Swim periods are free swim and do not include swim instruction.

	Session 1	2	3	4	5	6	7
Full Day:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Half Day:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Participant Name: _____

Age: _____ Gender: _____

Address: _____

Zip: _____

Parent Name: _____ Parent Cell: _____ Work #: _____

Allergies, health concerns, special needs: _____

I, the undersigned parent/guardian of _____ understand that University Club and its employees/contractors are not responsible for liability that may arise from participation in athletic camps. My signature confirms my understanding of this activity's risks, and hereby releases the University Club and its representatives from all claims of injury that may arise through participation. Furthermore, I grant the University Club the right to take photographs/videos of my child in connection with this program, and to use such materials (with or without credit) for any lawful purposes such as publicity, illustration, marketing, or online content.

Signature: _____ Date: _____

Date: _____ Receipt #: _____ Amt. Paid: _____

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