TOTS TENUS SUMER CAMP

REGISTRATION FORM

Child's Name:		
Address:		
 Phone #:	 _ Member #:	Child's D.O.B:
Emergency Contact:		Phone #:
Pertinent Medical Inform	nation:	
Summer Tennis Camp Ag	jes 3 - 6 (minim	um 4 per session)
Fee: \$20 week / \$10 per day When: Monday - Thursday 8:30 - 9: AN		
Fee: \$20 week / \$10 per	day I When: N	/londay - Thursday 8:30 - 9: Al
Fee: \$20 week / \$10 per WEEK:	day I When: N	/londay - Thursday 8:30 - 9: Al DAILY:
•	day I When: N	-
WEEK:	day I When: N	DAILY:
WEEK: Session 1: June 11 – 14 Session 2: June 18 – 21	day I When: N	DAILY: M T W TH
WEEK: Session 1: June 11 – 14	<u> </u>	DAILY: M T W TH M T W TH
WEEK: Session 1: June 11 – 14 Session 2: June 18 – 21 Session 3: June 25 – 28	<u> </u>	DAILY: M T W TH M T W TH M T W TH
WEEK: Session 1: June 11 – 14 Session 2: June 18 – 21 Session 3: June 25 – 28 Session 4: July 9 – 12		DAILY: M T W TH M T W TH M T W TH M T W TH
WEEK: Session 1: June 11 – 14 Session 2: June 18 – 21 Session 3: June 25 – 28 Session 4: July 9 – 12 Session 5: July 16 – 19		DAILY: MTWTH MTWTH MTWTH MTWTH MTWTH

