



# 2016 SPARTANS TENNIS CAMP

**July 11—July 15**

**5-10 Year Olds—from 6:00-7:00pm &  
11-16 Year Olds—from 7:00-8:00pm**

*Please circle the age group and time your child falls into:*

**AGES 5-10:** 6:00 — 7:00 p.m.

**AGES 11-16:** 7:00 — 8:00 p.m.

**DATES:** Monday through Friday, July 11-15

**FEE:** \$40 - **PLEASE MAKE CHECKS PAYABLE TO JAMES REID**

*(Minimum of 5 children required for camp to make)*

**LOCATION:** SSS TENNIS COURTS

**INSTRUCTOR:** JAMES REID (*SSS Tennis Coach*)

**EQUIPMENT NEEDED:** TENNIS RACQUET (*extra racquets available to borrow*)

## SPARTANS TENNIS CAMP / July 11—July 15

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ SEX: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_

PHONE #: (home) \_\_\_\_\_ (work/cell) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Does your child have any unusual medical conditions or allergies? YES NO EXPLAIN: \_\_\_\_\_

As parent of the above named child, I understand in sports activities there is the possibility of accident and injury. I allow my child to participate voluntarily in these activities. I have read this agreement and understand its contents. I release and agree to hold harmless the Town of Smithfield Parks & Recreation Department and its agents from any claims arising out of injury to my child.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return registration form & payment to: Smithfield Parks & Recreation Dept.  
P.O. Box 2344, Smithfield, NC 27577  
934-2148 FAX: 934-6554

**For Office Use Only:**

AMOUNT PAID \_\_\_\_\_ CASH / CHECK \_\_\_\_\_ RECEIVED BY \_\_\_\_\_

