



2010 SPRING TENNIS/SPORTS CAMP

At Hagen Park Tennis Center

2020 Wilton Drive, Wilton Manors, FL 33305

954-390-2132

www.hagentennis.com or e-mail [tennisportscamp@comcast.net](mailto:tennissportscamp@comcast.net)

Dates: Thursday April 1 - Friday April 9, 2010 (7 Days of Camp)

Times: Full Day 8:00am - 5:00pm

Half Day 8:00am - 12:30pm

(Early Drop-off 7:30 am and Late pick up 6:00 pm - \$25 per Week)

Ages: Open to boys and girls ages 5 to 15

Fee: \$280.00 Full Day per Week

\$175.00 Half Day per Week

Daily Drop Off Rates: \$50 Full Day / \$35 Half Day (Location: near Recreation Center)

Other: Snacks and drinks provided throughout the day. Full day campers bring their own lunch or have the option of buying a sub. Wednesday and Friday is pizza day. Snack bar is available to purchase candy, soda, Gatorade, ice cream, etc. Drop Off and Pick Up near recreation center

LIMITED ENROLLMENT- PLEASE SIGN UP TODAY

REGISTRATION FORM

CHILDS NAME _____ AGE _____ DOB _____ SEX _____ CODE WORD _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

SCHOOL _____ GRADE _____ PARENTS _____ OTHERS ALLOWED TO PICK UP _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE _____ EMERG PHONE _____

DOCTORS NAME _____ PHONE _____ ALLERGIES OR SICKNESS _____ E-MAIL _____

CIRCLE ONE OR MORE THAT APPLY: FULL DAY: \$200.00 (7 Days) HALF DAY: \$125.00 (7 Days)

PERMISSION SLIP & RELEASE

In consideration of the privilege of being allowed to take part in the City of Wilton Manors "City's" Program, use the equipment and the facilities of the City, ride in the motor vehicles provided by the City and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned, individually and on behalf of my minor child named above do hereby agree to indemnify and hold harmless Eddie Sposa his employees and the City of Wilton Manors, its trustees, elected and appointed officials, agents, servants, volunteers and employees from and against all claims, demands, causes of action of whatsoever kind, and for any resulting judgments, losses, costs, damages, liability, expenses, including, but not limited to, attorneys' fees arising out of, occurring during or relating to the use of the equipment, facilities, motor vehicles of participation in City's Program. I further acknowledge and authorize the photograph and videotape and publication of such photographs and videotapes of my minor child to promote or publicize the City's Programs. I understand the physical requirements of participation in these activities and affirm that my child meets these requirements. I give permission for instructors, staff and emergency personnel to make necessary first aid decisions in the event of accident, injury or illness. In case of injury, accident, illness or inability to complete these activities, I will bear the full cost of any expense incurred due to any injury to my child or damage to my property. I will also assume all responsibilities for any items and or articles my child brings to camp that are broken, lost, or stolen.

PARENTS SIGNATURE _____ DATE _____

PLEASE MAKE CHECKS PAYABLE AND SEND TO:

**ED SPOSA 5290 NW 53RD AVENUE COCONUT CREEK, FL 33073
CALL 954-390-2132 FOR FURTHER INFORMATION**