

Ok to file _____

Payment: CA _____ Ck# _____

2024-2025

PALM GREENS TENNIS PROGRAM - REGISTRATION FORM

I agree to abide by the Rules and Regulations. I understand that there could be rule changes during the season. Current rules and changes will be posted as they occur. We will also send info via email. Court use is "play at your own risk". I understand that neither the Tennis Committee nor the Recreation Association assumes liability for any injuries that may occur on the courts.

Print Name:

Signature:

Date:

Palm Greens Address:

E-mail Address:

Phone #:

Emergency Contact Person:

Phone # for emergency contact:

Preferred Rotation Days: Mon ___ Wed ___ Fri ___

Preferred Playing Time: (Please write 1 and 2 for your 1st and 2nd choice)

7:30am: ___ 9:15am: ___ 10:45am: ___

No rotation - Team Play only (you can add rotation days at anytime): _____

Please note: The Tennis Committee will attempt to honor your playing requests but due to ongoing changes and court availability you may be assigned a different time than you requested.

Tuesday, Thursday, Saturday, and Sunday court sessions will be reserved for players desiring to make their own matches as well as team practices. All session times and rules will still apply. See bulletin board and emails for further info. There is a \$30 registration fee. Please make checks payable to **Palm Greens Tennis**.

Form Received By: _____