

Seven Locks

**Swim and Tennis Adult Program  
Summer 2010 Registration**



**Dexter MacBride Tennis Academy**

Please print out this registration form, *complete for each person attending* and return with your payment

Checks should be made payable to:  
**Dexter MacBride Tennis Academy**

P.O. Box 60701, Potomac, MD 20859

Name: \_\_\_\_\_

Skill Level: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

Street: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

City: \_\_\_\_\_

Cell/Work Phone: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

I understand that payment is due in full at the time I submit this application. There is a \$50.00 non-refundable application fee if he/she withdraws 48 Hours prior to his/her first registered session. Please read this form carefully and be aware that in signing up and participating in the identified programs/activities, you will be expressly assuming the risk and liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with said programs and activities (including transportation services/vehicle operation, when provided). understand the above information, assumption of risk, and waiver and release of all claims. If registering via fax, your facsimile signature shall substitute for and have the same legal effect as an original form signature

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

If you have any questions, feel free to contact Dexter at 240-372-5527.

**Session Information**

**Men: Tuesday 6:30PM - 8:00PM. Begins June 1st**

**Women: Thursday 6:30PM – 8:00PM. Begins June 3th**

**Fees: \$25.00 Per Class**

**\$117.00 Per 6 Classes**

**Clinics will be held throughout the summer. Feel free to drop in but please contact Dexter to let him know you are coming.**

**Total Remitted: \_\_\_\_\_**