

# JHSC SUMMER CAMP 2017 REGISTRATION FORM

Name:		Parent / Guardian(s) Name(s):	
Address:		City:	Postal Code:
Phone #:	Work #:	Cell #:	
School:	Birthdate: (DD/MM/YYYY)	Health Card #:	
Medical History:			
Please describe involvement in Sports:			
Any previous tennis experience? (Tennis Camps Only)		E-mail:	
I would like to register my child(ren) for the following session(s):			
BASKETBALL (ages 10-14)			
@ John Hatch Tennis Centre		MULTI SPORT @ John Hatch Tennis Centre (ages 5-10)	
Co-Ed July 10-14	<input type="checkbox"/>	July 3-7	Full Day <input type="checkbox"/> Morning <input type="checkbox"/>
Co-Ed Aug 14-18	<input type="checkbox"/>	July 17-21	Full Day <input type="checkbox"/> Morning <input type="checkbox"/>
		July 24-28	Full Day <input type="checkbox"/> Morning <input type="checkbox"/>
TENNIS (ages 6-18)		July 31 - Aug 4	Full Day <input type="checkbox"/> Morning <input type="checkbox"/>
@ John Hatch Tennis Centre		Aug 21-25	Full Day <input type="checkbox"/> Morning <input type="checkbox"/>
July 10-13	<input type="checkbox"/>	Aug 28 - Sep 1	Full Day <input type="checkbox"/> Morning <input type="checkbox"/>
July 24-27	<input type="checkbox"/>	<p>Please submit application form and deposit to:</p> <p style="text-align: center;"><b>John Hatch Sports Camp</b>  <b>4621 Wonderland Road South</b>  <b>London, Ontario</b>  <b>N6P 1G5</b></p>	
Aug 14-17	<input type="checkbox"/>		
Aug 28-31	<input type="checkbox"/>		
@ UWO			
July 3-6	<input type="checkbox"/>		
July 17-20	<input type="checkbox"/>		
July 31 - Aug 3	<input type="checkbox"/>		
Aug 21-24	<input type="checkbox"/>		
<p>Payment: A \$25:00 non-refundable deposit per child / per camp must accompany the Application. The balance is due the first day of camp. (Please make cheque payable to John Hatch Sports Camps.)</p>			
<p>CONSENT AGREEMENT: My child has permission to participate in the Camp and I agree to waive and release John Hatch Sports Camps Ltd. from any and all liability for any illnesses or injuries incurred while at the Camp. The Camp has my permission to act in any emergency in the best interest of my child. Permission is also given for the use of any photos for testimonials of my child in the camp brochure or other camp advertising.</p>			
Signature:		Date:	