



SEPTEMBER/OCTOBER TENNIS CAMP ENROLMENT FORM

(Please clearly print all details. Thank you)

CHILDS NAME/S: 1. _____ D.O.B: _____
2. _____ D.O.B: _____
3. _____ D.O.B: _____

PARENTS NAME/S: _____

ADDRESS: _____

CONTACT NO/S: _____

EMAIL: _____

ANY MEDICAL CONDITIONS: _____

IS BEFORE OR AFTER CAMP CARE REQUIRED? ☐ YES ☐ NO

If yes, please tick: ☐ Before camp care - drop off time: _____ ☐ After camp care - pick up time: _____

Which day/s do you require: ☐ MON ☐ TUES ☐ WED ☐ THURS ☐ FRI

PLEASE TICK THE APPROPRIATE BOX/S: (All camps are located at Mona Vale T.C)

☐ **WEEK 1:** Monday 28th September - Friday 2nd October

☐ **WEEK 2:** Tuesday 6th - Friday 9th October (4 DAYS DUE TO LONG WEEKEND)

FULL WEEK OPTIONS: ☐ **FULL WEEK - 9am-12:30pm** ☐ **FULL WEEK - 9am-3pm**

OR CHOOSE YOUR DAY/S & TIME/S: ☐ MON ☐ TUES ☐ WED ☐ THURS ☐ FRI
☐ **9AM - 12:30PM** ☐ **9AM - 3PM**

PAYMENT METHOD: ☐ **CASH** ☐ **CHEQUE** - made out to Goodwin's Tennis Academy

☐ **CREDIT CARD** - Card Type: (Please tick) ☐ VISA ☐ MASTERCARD

CARD NO.: _____ EXPIRY: _____ CCV: _____

NAME ON CARD: _____

I, being the parent or legal guardian of the above-named, take full responsibility for my child/children whilst attending this camp and understand that Goodwin's Tennis Academy will do the utmost for their care.

Signed: _____

I give permission to Goodwin's Tennis Academy to take and release any photos of my child for their website, Twitter account, Facebook account and Instagram page.

Signed: _____