

2016

Chinook Park Tennis Club Registration & Waiver

Community Association Membership 2015-2016 # \_\_\_\_\_ Community Name \_\_\_\_\_

CPTC Facility Fee 1st-year only : Family (\$50) [ ] Adult (\$30) [ ] Junior (\$30) [ ] \$ \_\_\_\_\_

2016 CPTC membership & lessons Family (\$175) [ ] Adult (\$120) [ ] Junior (\$70) [ ] \$ \_\_\_\_\_

Key Deposit: (\$5.00/key) ..... \$ \_\_\_\_\_

Total fees (make cheque payable to CKE Community Association) \$ \_\_\_\_\_

Table with 4 columns: Family Name, First Name, Adult or Junior, Junior's Age (6-17). Includes rows for Adult and Junior categories.

Contact information – will be used for tennis purposes only

Form with fields for Address, Phone, Cell, and Email.

- Consent checkboxes: I consent to receive tennis-related e-mails... I consent to share EmailID... I consent that the listed participant(s)...

- 1 I/we the Undersigned hereby release Advantage Tennis Academy Inc. and CPTC Tennis Club...
2 I/We agree to hold harmless and indemnify the Parties from any and all liability...
3 I/We do hereby acknowledge and agree that:
a) Tennis is a sport exposing participants to risks and hazards...
b) As a result of the aforesaid risks and hazards, the Participant may suffer personal injury;
c) I/We nevertheless freely and voluntarily assume all of the aforementioned risks and hazards...
d) I/We understand that none of the Parties assume any responsibility or liability whatsoever...
e) I/We understand that by signing this document title the Chinook Park Tennis Club Registration and Waiver (the "Waiver"), I/We will be forever precluded from suing or otherwise claiming against the Parties for any loss or damage...
f) I/We understand that the Association would not permit the Participant's involvement in programs or events unless I/we sign the Waiver. I/we understand that the Waiver applies to any events...
g) This Waiver is binding upon myself/ourselves, my/our heirs, executors, administrators, personal representatives and assigns;
h) I/We have carefully read this Waiver and I/We fully understand same, and that I/We are freely and voluntarily executing same.

DATED at the City of Calgary, in the Province of Alberta, this \_\_\_\_\_ day of \_\_\_\_\_, 2016.

Applicant / Parent or Guardian Signature

Witness Signature

PRINT name of Applicant / Parent or Guardian

PRINT name of Witness