

2024 AFTER-SCHOOL PROGRAM REGISTRATION FORM

Student Name: _____ Phone Number _____ Email: _____ Age: _____

Contact Information

Parent/guardian: _____ Work Phone# _____

Emergency Contact: _____ Work Phone# _____ Cell Phone # _____

Emergency Contact is same as above

Medical Information

Does your child have any medical conditions we should be aware of? If yes, please explain.

Health Card #: _____

Is medication required to be given while in the afterschool program? Yes No

Pick-Up Information

Adults permitted to pick-up from Afterschool program (Note: You must sign your child in/out of program each day. If your child is 11 years of age or over, you can write a note giving permission for your child to sign themselves in/out.)

PLEASE CONFIRM

Pick-up information is same as contact information section

Name:		
Relation to Camper:		
Address		
Contact Info:	Email:	Phone:

Name:		
Relation to Camper:		
Address		
Contact Info:	Email:	Phone:

Choose your sessions:

Sessions start May 6 and run until June 27, 2024

	# of Sessions	4pm Beginners	5pm Inter. & Adv	Please list Age of Player
		All Ages		
Monday	7			
Tuesday	8			
Wednesday	8			
Thursday	8			

PLEASE CONFIRM CAMPER LEVEL:	LEVEL 1	LEVEL 2
BEGINNER	Never played Tennis	Has played some tennis
INTERMEDIATE	Ability to rally from the service line consistently.	Ability to rally for Base Line
ADVANCED	Consistent rally from the Base Line	Ability to rally/ serve consistently from Base Line

- **Cost** for after school program is \$20/hr per day HST is included
- Player **MUST** commit for all weeks (7 or 8)
 - Example Tuesday 1xwk 5pm for 8 weeks = \$160 for the after school program
- ****Method of payment:** Cash/ Check or Etransfer to ericka@perfectbalancecanada.com
- ****If writing a cheque, it must be made out to Perfect Balance Canada**
- **** Please note that costs include HST of 13%**
- ****To secure your spot please send Payment with registration.**
- ****At latest Payments will be collected 2 weeks prior to the first day of program.**
- ****No refunds / make up sessions will be offered (for emergency reasons please discuss with Wayne Ho-Sang directly)**

To register/ more info. Send form to hosangtennis@gmail.com or contact 416-254-5773

LIABILITY WAIVER:

I understand that **Wayne Ho-Sang &/or Perfect Balance Canada** does not assume or accept responsibility/ liability for any expenses or outcomes from loss /injury sustained while engaged in any activity during the course of the camps whatsoever, on or off premises. Students/Campers will be coached and reminded on COVID-19 Precautions/Safety or other Public Health announcements. Protocols will be aligned with City Regulations, Tennis Canada and German Mills Tennis Club Guidelines. Students/Camper and adults when picking up and dropping off students must follow rules identified.

Parent/Guardian Signature: _____

Date: _____