

Municipal Sports Section

TENNIS ENTRY FORM

Last Name: _____	First Name: _____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Birthdate: _____ Age: _____ USTA # _____			
Parent/Guardian: _____		Primary Phone: _____	
Alternate Phone: _____		Email: _____	

Events (Please Circle)			
Players may play in only one age classification.			
Boys Singles		Girls Singles	
10 & under	14 & under	10 & under	14 & under
12 & under	16 & under	12 & under	16 & under

PARENT/GUARDIAN: PLEASE READ AND INITIAL EACH ITEM

_____ **CONSENT:** By registering I understand that I give my authorization for my child to participate in the Municipal Sports Tennis Tournament. I further agree to relieve the City of Los Angeles Department of Recreation and Parks, its officers, agents, and employees from any liability for injury to my child resulting from and/or in connection with the activities in its programs. I understand Municipal Sports CARRIES NO INSURANCE. I do hereby authorize the City of Los Angeles to act as agent for my child: to consent to any x-ray examination, anesthetic, medical or surgical diagnosis, treatment/hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon licensed, under the provisions of the Medical Practice Act, and on the medical staff of a licensed hospital; whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. This authorization is given in advance of any specific consent. This authorization shall remain effective for the duration of the program, unless revoked sooner in writing and delivered to said agent.

_____ **CODE OF CONDUCT:** I will put the emotional and physical well-being of the children first, making me a good role model of sportsmanship and character. I will try to make the game FUN for all involved and not take it too seriously. I will lead by example by being fair and treating all participants, coaches, staff, and the public with respect, creating a positive recreation experience for everyone. I will not use drugs, tobacco, or alcohol at youth sports events. I will remember that the game is for the children, not the adults, and I will encourage, not pressure, my child to play. **I understand that the penalties for not following this code may range from a verbal warning to expulsion from the activity.**

I have read, understand, and agree to abide by the above mentioned policies and practices.

_____ PARENT/GUARDIAN SIGNATURE

_____ DATE

COMMENTS

FOR OFFICE USE ONLY			
Receipt Number	Date Paid	Amount Paid	Staff Initials

Mail this Entry Form along with a check for **\$43.50**, made payable to "**City of Los Angeles**", to:
City of L.A. Dept. of Rec. & Parks
Municipal Sports Tennis
3900 Chevy Chase Drive
Los Angeles, CA 90039

Check must be received by the Tuesday before the Tournament starts

- OR -

Go to www.usta.com, Log In and register for the Tournament.