



Registration Form

CONTACT INFORMATION

Child(ren)'s Name(s): _____

Home Phone: _____ Cell Phone: _____

Mailing Address: _____

Email Address: _____

CREDIT CARD INFORMATION (Visa or MasterCard only)

Credit Card # _____

Security Code (3 digits on back of card) _____

Expiration Date _____

Billing Address _____

Initial here _____ if you choose to Auto-Pay by credit card (we will automatically charge your card on the 1st of each month along with a \$5 service fee).

Because we plan our schedules 30 days in advance, we require a 30 day notice if you drop any part of the program for any reason. After giving your notice, you are responsible for the next billing period.

I UNDERSTAND AND AGREE TO ALL OF THE ABOVE TERMS. I AGREE THAT ANY FEES THAT HAVE NOT BEEN PAID BY THE 10TH OF THE MONTH WILL BE CHARGED TO THE ABOVE CREDIT CARD. I ALSO UNDERSTAND THAT ANY OF THE ABOVE POLICIES ARE SUBJECT TO CHANGE WITH A 30 DAY NOTICE FROM THE TENNIS ACADEMY OF GEORGIA, WHICH WILL BE POSTED AT THE CLUB IN EAST COBB AND SENT OUT VIA EMAIL.

Photo Release Form

I hereby grant the Tennis Academy of Georgia permission to use my child's likeness in a photograph or video in any and all of its publications, including website entries, without payment or any other consideration.

I hereby irrevocably authorize the Tennis Academy of Georgia to edit, alter, copy, exhibit, publish or distribute this photo or video for purposes of publicizing the Tennis Academy of Georgia's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my child's likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph or video.

I hereby hold harmless and release and forever discharge the Tennis Academy of Georgia from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 21 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

Sign and Date: _____