



Please complete this **2024 ATA SOUTH High Performance Tennis Camps** RELEASE & WAIVER, sign it, have your parent or guardian sign it, take a picture of it and email it back before your first day of play. This is required in order to participate in this event, this form, signed by your parent or guardian and you, must be sent back through email or presented on-site to league tournament director before or on first day of play. Please use black ink and print clearly.

Player's Name _____

Address: _____
(Street) (City) (State) (Zip)

Phone (Home): _____ Phone (Office): _____

Name of Event: _____

The **2024 ATA SOUTH High Performance Tennis Camps** Release: The ATA South and Sugar Creek Golf & Tennis requires a signed release covering all registered youth players competing in the **2024 ATA SOUTH High Performance Tennis Camps**. The release must be signed by the entrant and parent or guardian of any entrant who is a minor.

Acceptance of my registration in the **2024 ATA SOUTH High Performance Tennis Camps** is without assumption or responsibility of any kind by the Sugar Creek Golf & Tennis, the ATA South, the American Tennis Association, World Tennis Number, its state associates or committee or the management of any kind in which I may be associated with while participating in the **2024 ATA SOUTH High Performance Tennis Camps**. In consideration of the acceptance of my registration, I do hereby for and on behalf of myself, and my heirs and my legal representatives release and forever discharge the **2024 ATA SOUTH High Performance Tennis Camps**, Sugar Creek Golf & Tennis, the ATA South, the American Tennis Association, World Tennis Number, its state associates or committee or the management and representatives and their successors and assigns, of and from any and all claims and damages, losses or injuries which may be suffered or sustained by me in connection with my activities during the period for which such permission is granted and any period traveling to and from the **2024 ATA SOUTH High Performance Tennis Camps** described, and all claims are hereby waived and release, and I covenant not to sue therefore.

(Signature of Entrant) (Signature of Parent or Guardian)

(Date) (Street) (City) (State) (Zip)

Medical Release: I hereby consent to the rendering of emergency first aid and other medical procedures, which at the time of injury or illness seems reasonably advisable. I further understand that I will be responsible for payment of any such medical procedures. In consideration of the acceptance of my entry, I hereby agree to abide by all applicable rules and regulations and codes of Dekalb County Parks & Recreation for this **2024 ATA SOUTH High Performance Tennis Camps**, and hereby consent to be tested for drugs pursuant to the provisions thereof.

(Signature of Entrant) (Signature of Parent or Guardian)

(Date) (Street) (City) (State) (Zip)