

2018 Registration Form

New Member

				Please mark your interest in the following with an X					
Name		Phone Number	Junior DOB (dd/mm/yy)	A & B	Ladies	Lessons/ Clinics	Tennis for Kids	Ladies Doubles	Mens Fridays
First	Last			Interclub	Intercounty				
1									
2									
3									
4									
5									
6									

Email Addresses

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

Mailing Address:

Street _____

Town _____

Postal Code _____

Membership Type (circle one)

Family \$160

Single \$100

Student \$55

Membership Total

Note: * Four Complimentary Junior Lessons (May 1,18,15,22) included when you sign up for a junior or family membership
Note: * Please complete the waiver form on reverse

Office Use

Payment Method (circle one)

Cash

Received by: _____

Date: _____

Cheque

Interac

Make cheque payable to: Caledon Tennis Club
 Register in person April 21, 2018 or mail this form/payment to:
 Caledon Tennis Club 18357 Hurontario St. Caledon, ON L7K 0X7

For further information on registration
 please call Brad Atkinson at (647) 668-2661

**Caledon Tennis Club
INFORMED CONSENT**

IN CONSIDERATION OF the acceptance of my application, and if applicable, my family's application to be a member – ON BEHALF OF MYSELF AND ANY OTHER REGISTERED FAMILY MEMBERS AGREE to abide by the following regulations and guidelines of the Club:

1. I acknowledge that it is the responsibility of myself and each member of my family to contribute to the safety of the Club premises and I and each member of my family will check the court, the clubhouse, the deck and the ~~portalet~~ for hazards prior to play. I and each member of my family will remove the hazardous material to a waste receptacle. I and each member of my family will notify a member of the Club executive if I or each member of my family observes a more serious hazard.
2. I or each member of my family will report any concerns regarding abuse and harassment of children to the appropriate Children's Aid Society and/or to a member of the Club executive.
3. I or each member of my family will accompany my or my family's guests to the Club premises and ensure that these guests comply with the Club's regulations.
4. I and each member of my family will not reproduce or distribute any key and/or access mechanism to the Club's premises and I and each member of my family will not divulge the security code to any person.
5. I and each member of my family will return the Club any key/access mechanism to a member of the Club executive when I and each member of my family is no longer a member.
6. I and each member of my family will abide by the Club's regulations against discrimination on the basis of culture, race, socio-economic status, gender, age or ability as defined by the Ontario Human Rights Code.
7. I and each member of my family acknowledge that the Club has the right, to be exercised at its discretion, to refuse a membership application and to cancel a membership where the Club's executive has become aware that a member is consistently or repeatedly not complying with the Club's regulations and/or is engaging in inappropriate behaviour.

Consent, Release, Waiver, Indemnification and Medical Authorization

I and each member of my family recognize the risk of injury or potential health risk may be involved in the applicant's participation in this Club. I and each member of my family willingly assumes such risk for myself and each member of my family. I and each member of my family consent to the administration of any emergency medical treatment administered or arranged by the Club and agree to be responsible for any and all costs associated with this treatment.

In consideration of the Club accepting the application of the minor, whose name appears on this application, I, and each member of my family, hereby RELEASE, DISCHARGE, INDEMNIFY AND SAVE HARMLESS the Club, and those in law it is responsible for, of and from any and all claims or demands, whatsoever and howsoever caused arising or to arise from injury to or the death of myself or any member of my family by reason of my/our participation in the Club, its programs and activities including traveling to and from any of these programs or activities or by reason of the provision of medical care to me and/or each member of my family.

I, on behalf of myself and each member of my family, have carefully read and understood the Membership Application Guidelines, and the Informed Consent, Release, Waiver, Indemnity, Consent and Authorization Agreement and agree, on behalf of myself and each member of my family, to accept, abide and be bound by all of the above.

Signature _____ Date _____