



**MOREHEAD CITY
PARKS & RECREATION**

Easter Tennis Camp

Tennis Camp at Shevans Park

Philosophy: The camp will offer an exciting tennis experience with an emphasis on fun, skill development, tactics and competition. Concentration will be placed on an intermediate to advanced level of play. The camp will emphasize technique tactics in an intense training environment. This will include patterns, rotations, and bump drills to build stroke development.

Camp Staff: Randy Bailey – USPTR Certified Tennis Professional. Coached players to multiple state, southern and national championships for over 30 years.

Equipment: All participants should wear comfortable clothing, tennis shoes and bring a tennis racquet, water, sunscreen and a hat.

When: April 17th – 20th

Ages: 10 – 18 year olds

_____ **Half Day:** 9:00am – 11:00am

Cost: \$150

_____ **Full Day:** 9:00am – 11:00am; 12:00pm – 1:30pm

Cost: \$200

Please make checks payable to: Randy Bailey

Send to: 706 Arendell St. Morehead City, NC 28557

For more information: Contact Kirk Peterson 252-726-5083 or kirk.peterson@moreheadcitync.org or Randy Bailey at 252-714-426. Registration forms can be found at www.moreheadcitync.org. Registration will be accepted at the Morehead City Parks & Recreation Department office located at 1600 Fisher Street.

Player Registration

Player's Name: _____

Age: ____ **DOB:** _____ **Gender:** ____

Address: _____

Phone #: _____

City/State/Zip: _____

Email: _____

Release of Liability and Indemnity Agreement

I do hereby and forever discharge, and will save harmless from and indemnify, Morehead City, its elected and appointed officials, the Morehead City Parks and Recreation Department, and all the staff, participants, instructors, and administrators of the Morehead City Parks and Recreation Department from any and all actions, claims, and demands for or by reason of any damage, loss or injury which hereafter may be sustained by me or my child in consequence of participation by said person in this program.

I hereby acknowledge and admit that the Morehead City Parks and Recreation Department shall not be required to carry any insurance protection for the participants and thereby do agree to provide individual insurance coverage for myself and child.

I have read and understand this Release of Liability, and acknowledge that I have had time and opportunity to do so as well as to consult with anyone of my choice.

Permission is hereby granted for my child _____ to participate in the Morehead City Parks and Recreation Department's program.

Parent/Guardian Name (print)

Parent/Guardian Signature

Date