

2017 WOODSTOCK TENNIS CLUB
WAIVER FORM FOR JUNIORS

Junior's Name(s):

_____ Age _____

_____ Age _____

_____ Age _____

Parent/Guardian's Name: _____ Phone: _____

I understand that the game of tennis involves some risk of physical injury and I agree to fully assume that risk in connection with playing tennis at the Woodstock Tennis Club, Inc. I further agree that if I or a child or ward of mine under the age of 18 is injured while playing tennis at WTC, I will not seek to hold the WTC legally responsible for said injuries.

Signature: _____