

SUGAR CREEK GOLF AND TENNIS CENTER

2706 Boldercrest Road
Atlanta, Georgia 30316
(404) 243-7149

PROGRAM REGISTRATION FORM

ENROLLMENT DATE: _____

NAME _____ DOB _____ AGE _____

STREET ADDRESS

CITY _____ STATE _____ ZIP _____

HOME # _____ WORK# _____ CELL # _____

EMAIL _____

NAME OF PROGRAM: (circle one): JUNIOR ADULT

NAME OF PROGRAM _____

DAY(S) SELECTED _____ TIME SELECTED _____

Make Checks payable to:

"First Serve, INC."

Amount Paid:

\$ _____

for _____

Staff Use Only

MOTHER'S NAME: (if under 18) _____

FATHER'S NAME: (if under 18) _____

EMERGENCY CONTACT(S) INFORMATION:

1. NAME _____

STREET ADDRESS _____

CITY, STATE & ZIP _____

PHONE # _____

2. NAME _____

STREET ADDRESS _____

CITY, STATE & ZIP _____

PHONE # _____

Release and Hold Harmless and Emergency Medical Treatment Agreement

The undersigned hereby forever releases, discharges and covenants to hold harmless. First Serve, INC., the Dekalb County Parks and Recreation, and Dekalb County, Georgia and any other person, firm, corporation, charged or chargeable with responsibilities or liability, their heirs, administrators, executors, successors, and assignees from any and all claims, demands, damages, of any kind sustained or that may hereafter be sustained arising out of the matters described herein or in consequence of the participation in the recreational program sponsored by Sugar Creek Golf and Tennis Center. The undersigned hereby any bind their heirs, administrators, executors, and successors.

Further agreement shall apply to all unknown and unanticipated injuries and damages directly and indirectly resulting here-form. This release is harmless agreement shall constitute a full and complete release of any and all claims.

DATE: _____

DATE: _____

STUDENT SIGNATURE

PARENT/GUARDIAN SIGNATURE