



Guilford Racquet & Swim Club

GRSC Summer Junior Swim, Pickle & Tennis Program Application

Participant's

Name: _____ DOB: _____

Parent Name:

Parent

Email _____ Phone: _____

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Address: _____

Program Names(s); please list specifics, including title, level and session:

Is the participant currently a GRSC Member? (circle one)

Platinum Member

Gold Member

Non-member

I, the participant and/or parent/guardian of minor participant, recognize the possibility of physical injury and/or illness (including COVID-19), associated with the activities at GRSC. I hereby release, discharge and/or otherwise indemnify Guilford Racquet & Swim Club, GRSC Day Camp, ARI Development Corp, Inc and associates, all personnel against claims by or on behalf of the registrants as a result of the registrant's participation in GRSC programs. I will not hold Guilford Racquet & Swim Club or any of its affiliates liable for any loss or damage relating to or resulting from an illness even if such loss or damage results from attendance at GRSC.

I authorize use of participant photos on GRSC's website, fliers, social media, brochures and advertising.

Parent/Guardian Signature

_____ Date _____

Credit Card # _____ Exp Date _____ CVV
Code _____