



Tuesday - Friday, June 1 - 4

Kids entering 9 - 12th grade....7:45 - 9:15 P.M.

Play under the lights!!

\$70 includes 4 lessons and camp shirt

**Kids will need: * positive attitude * comfortable sports shoes * bottled water
* their own racquet**

Summer Tennis Camp & Medical Treatment Release:

I grant approval for my child to participate in this camp and release Beatrice High School and any instructors, coaches, trainers, and assistants from any liability arising from his/her participation in said athletic camps. I also understand with the current state of Covid, my child is attending at their own risk. I understand Beatrice High School does not provide health or medical insurance for participants.

- Consent is hereby given to the Beatrice High School instructors, trainers, coaches, and other staff to give or seek medical aid required in the case of emergency.
- Summer camps will not be prorated due to student's inability to attend all sessions.
- Registrations will not be accepted without payment.
- No refunds will be given following registration. Please be sure your child can attend BEFORE you register.

I have read and agree to statements contained in the Tennis Camp Release and Medical Form above.

Parent/Guardian signature required: _____ Date _____

Participant's Name _____ grade fall '20 _____ shirt size _____

Phone numbers - student _____ parent _____

Parent email address _____

Please list health or other concerns here: _____

**Make checks payable to BHS BOYS Tennis. Return to BHS Office or 415 Grant St by
Tuesday, May 25.**

GENERAL LIABILITY WAIVER AND HOLD HARMLESS AGREEMENT

FOR FACILITY USE ON SCHOOL DISTRICT PROPERTY

I represent that I am a legal, responsible adult. I represent and warrant that I am signing this document for myself and my children as to any facility usage on School District property to include, but not limited to, the weight room or other workout facility. I am fully aware of the risks and dangers of such usage. I understand that the usage of the weight room and workout facilities is voluntary, at my and my children's own risk, and that the School District is not responsible in any manner for my or my children's usage or any personal injury or property damage to me or my children as a result of the usage of any such facility. I further understand that I am solely responsible for any personal injury or property damage caused by me or my children as a result of the usage of any such facility. I acknowledge that, in the middle of a global pandemic, there is a serious risk that, by using the facility, I or my children could contract a dangerous virus or other health condition, and that I accept this risk and nonetheless voluntarily choose to allow my children to use the facility.

In consideration of my children being allowed usage of any District property or facility during the COVID-19 pandemic and for other good and valuable consideration, receipt of which is hereby acknowledged, on behalf of myself, my children and all others who may claim by, under, or through myself I do hereby agree to indemnify and hold harmless and do hereby release, acquit, and forever discharge the School District and all of its officers, employees, agents and assigns, and all other persons or companies from any and all claims, actions, or causes of action which I or my children now have, or which may hereafter accrue, whether for personal injury or property damage, whether known or unknown, arising out of or in any way resulting from my and/or my children's usage of any District property or facility during the COVID-19 pandemic, including the summer months of 2020.

I understand and agree that my signature below represents a signature on behalf of myself and each of my children.

Signature of each parent or guardian:

Date of Signature

Name of each child:
