

# 2018 LOCKHART TENNIS CAMP



**Who:** Elementary/Junior High and Beginners

**When:** **Mon-Thurs 8:30 to 11:00 am**  
Session 1: June 18 – June 21 or Session 2- July 9 – 12

**Staff:** LHS/LJHS Tennis Coaches

**Where:** Lockhart High School Tennis Courts

**Cost:** \$30.00 per athlete (\$30 first child, then \$15 per sibling in same family.) (Fee Waiver Available)

**Purpose:** To provide individual fundamental tennis skills

**Equipment:** Tennis shoes, shorts, shirt, water bottle (labeled), sunscreen

**Medical:** All participants should be able to physically compete in all activities and drills

**Registration:** Mail or drop off to:  
**Lockhart Athletic Department**  
**c/o Lockhart Tennis - Coach Vazquez**  
**#1 Lion Country Lockhart, TX 78644**

**\*If paying by check, Make checks payable to Lockhart Athletics.**  
**For more info Coach Vazquez @512-398-0350 or [leopoldo.vazquez@lockhart.txed.net](mailto:leopoldo.vazquez@lockhart.txed.net)**

PLEASE DETACH BOTTOM PORTION AND RETURN WITH PAYMENT

## LOCKHART TENNIS CAMP

Please check one which session your child will be attending:

SESSION 1 (June 18 - 21) \_\_\_\_\_ SESSION 2 (July 9- 12) \_\_\_\_\_

Camper's Name: \_\_\_\_\_ Grade for 2018-19: \_\_\_\_\_ T-Shirt Size: Y L AS AM AL AXL A2XL

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Parent's Name(s): \_\_\_\_\_ Cell# \_\_\_\_\_ Work# \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Cell# \_\_\_\_\_ Work# \_\_\_\_\_

## LOCKHART ISD LIABILITY RELEASE FORM

Participant releases the Lockhart I.S.D., its officials, employees and volunteers from any and all liability for any claim by Participant of bodily injury, property damage, or other legal injury of any description arising from Participant's use of Lockhart I.S.D. facilities or participation in or attendance at the Camp / Event. The term "Participant" includes both the individual Participant and any parent or guardian signing this document on behalf of the Participant.

Participant further covenants and agrees that Participant or Participant's legal representatives will not assert or file any claim against Lockhart I.S.D., its officials, employees or volunteers seeking monetary or other relief of any description based on any claims released in this document. Participant agrees to indemnify and hold harmless Lockhart I.S.D., its officials, employees or volunteers from all costs and expenses of defending against such claims.

The release and indemnity obligations of Participant shall apply without regard to whether the bodily injury, property damage, or other legal injury complained of were caused, in whole or in part, by the Lockhart I.S.D., its officers, employees or volunteers. I as parent or guardian, hereby give permission for my child to participate in any and all Lockhart ISD high school camps. I hereby authorize the coaches of any and all camps to act for me according to their best judgment in any emergency requiring medical attention and acknowledge that I will be responsible for any cost incurred due to sickness or injury to my child.

This release does not waive any claim of governmental or statutory immunity or any other legal defense available to the Lockhart I.S.D. or its officials, employees or volunteers under Texas or federal law. By signing below I certify that I have read, understand and accept the terms of this document.

\_\_\_\_\_  
Camp Participant

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Printed Name