



www.GoGo-Tennis.com

2008 Private Lesson Registration Form

Tennis Lessons will be held at Aragon High School Tennis Courts ([Map](#))

Player 1 Information

(for Player 18 or younger)

Player Name		Parent(s) Name	
Address		Address	
City, State & Zip		City, State & Zip	
Home Phone		Home Phone	
Cell Phone		Cell Phone	
Emergency Phone		Emergency Phone	
Emergency Contact		Emergency Contact	
Date of Birth		Relationship to Player 1	
Email		Email	
Tennis Experience			

Player 2 Information

(for Player 18 or younger)

Player Name		Parent(s) Name	
Address		Address	
City, State & Zip		City, State & Zip	
Home Phone		Home Phone	
Cell Phone		Cell Phone	
Emergency Phone		Emergency Phone	
Emergency Contact		Emergency Contact	
Date of Birth		Relationship to Player 2	
Email		Email	
Tennis Experience			



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Player 3 Information

(for Player 18 or younger)

Player Name		Parent(s) Name	
Address		Address	
City, State & Zip		City, State & Zip	
Home Phone		Home Phone	
Cell Phone		Cell Phone	
Emergency Phone		Emergency Phone	
Emergency Contact		Emergency Contact	
Date of Birth		Relationship to Player 3	
Email		Email	
Tennis Experience			

Player 4 Information

(for Player 18 or younger)

Player Name		Parent(s) Name	
Address		Address	
City, State & Zip		City, State & Zip	
Home Phone		Home Phone	
Cell Phone		Cell Phone	
Emergency Phone		Emergency Phone	
Emergency Contact		Emergency Contact	
Date of Birth		Relationship to Player 4	
Email		Email	
Tennis Experience			



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Private & Group Lessons

Table with 3 columns: Lesson Type, Check Box, Lesson Cost. Rows include Private Lesson (1 Player), Semi Private Lesson (2 Players), Group Lesson (3 Players), and Group Lesson (4 Players) with sub-options for 1-hour and 4-hour sessions.

Registration Fee (\$10/Player Non Refundable) _____

TOTAL (check payable to GO GO Tennis) _____

WAIVER: I hereby agree to hold San Mateo Union High School District & their trustees, Officers & employees, GO GO Tennis & their staff/employees from all liability that may arise as a result of my child's/my participation in the activities listed herewith. I understand that this activity may involve risk or accidental injury and hereby voluntarily assume all risks.

Signature of Player 1 _____ Print Name & Date _____
Signature of Player 2 _____ Print Name & Date _____
Signature of Player 3 _____ Print Name & Date _____
Signature of Player 4 _____ Print Name & Date _____

Parent Signatures For Player ages 18 or under

Parent(s) for Player 1 _____ Print Name & Date _____
Parent(s) for Player 2 _____ Print Name & Date _____
Parent(s) for Player 3 _____ Print Name & Date _____
Parent(s) for Player 4 _____ Print Name & Date _____

Mail Completed Registration Form & Check to : GO GO Tennis, PO Box 6373, San Mateo CA 94403

For Questions contact GO GO Tennis @ info@GoGo-Tennis.com or 650-458-8300