

SQUASH

To register, fill out a Program
Registration Form or contact:

Program Director:

Phone:

Email:

Visit sportandhealth.com/sports

sport&health

BETHESDA

4440 Montgomery Ave.
Bethesda, MD 20814



DATE:

LOCATION:

TIME:

COST:

sport&health | Squash Program Registration Form

For **AGES 18 & UNDER**, please fill this portion and complete Program information and Payment section (if applicable).

Participant's Name _____

Age _____ Grade _____ Level _____ Member Nonmember

Home Phone _____ Cell Phone _____ Email _____

Address _____

City _____ State _____ Zip _____

Emergency Contact if parents cannot be reached:

Name _____ Phone Number _____

Relation to Child _____

Mother's Name _____ Father's Name _____

Work Phone _____ Work Phone _____

Cell Phone _____ Cell Phone _____

Allergies or Medical needs _____

List names approved to sign out your child:

1. _____ Relation to Child _____

2. _____ Relation to Child _____

ADULTS OVER 18, please fill this portion and complete the Program Information and Payment section (if applicable).

Participant's Name _____ Member Nonmember

Level _____ Street Address _____

City _____ State _____ Zip _____

Home/Work Phone _____ Cell Phone _____ Email _____

PROGRAM INFORMATION and PAYMENT (If applicable)

Program Name _____ Club Location _____

Start/End Date _____ Day(s) _____ Start Time _____ End Time _____

Total Amount \$ _____

Type of Payment: Cash Check MasterCard
 Visa AMEX Discover

Card #: _____ Exp Date: _____

Signature: _____ Date: _____

RELEASE:

In consideration of making facilities and/or services available, I do hereby for and on behalf of myself and my heirs and legal representatives, release Sport&Health, its owners, managers and representatives from any and all claims and demands of every kind, nature and character which I may have or hereafter acquire for any and all damages, injuries or losses which may be suffered or sustained by me in connection with my activity.

Signature _____

I authorize Sport&Health Clubs to charge my account.

I authorize Sport&Health Clubs to auto-charge my account each month for this program.

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