

**LUCKMAN PARK TENNIS ASSOCIATION**

THE 2009 SUMMER TENNIS PROGRAM – JUNE 29<sup>TH</sup> –  
AUGUST 6<sup>TH</sup>. LUCKMAN PARK TENNIS COURTS,  
Monday – Thursday 3:30 – 5:30 p.m.

(Courts are located at the corner of Key Avenue and Glen Avenue) Children ages 6 (or have completed the first grade) to 16 years. Cost for eight weeks: \$100 per child.

Please mail completed registration form to LUCKMAN PARK TENNIS ASSOCIATION, C/O Chester Frazier, 5803 Merville Ave., Baltimore, MD 21215-4127

Make checks payable to: Luckman Park Tennis Association, and mail along with your application. Please try to submit your registration materials on or before Jun 1, 2009.

**LUCKMAN PARK TENNIS ASSOCIATION  
2009 SUMMER PROGRAM  
REGISTRATION FORM**

Name: \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

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

Address \_\_\_\_\_

Phone # (home) \_\_\_\_\_ Work# \_\_\_\_\_

Emergency contact name and telephone:  
\_\_\_\_\_

Check # \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ is enclosed for  
\_\_\_\_\_ children @ \$ 100.00

**I understand that the Luckman Park Tennis Association  
cannot be responsible for injury to the participants.**

Name of Parent / Guardian (Please print)

\_\_\_\_\_  
Signature of Parent / Guardian

\_\_\_\_\_ Date \_\_\_\_\_.