

Atlanta International Table Tennis Academy



Winter Break Camp Registration Form

First Name _____

Last Name _____

Address: _____

DOB: _____

Gender: _____

Phone Number: _____

Email: _____

Camp Date: Camp 1 (12/26-12/29/2017), Camp 2 (01/02-01/05/2018)

Time: 9:30am-4:00pm

Price: \$160 Each Camp (beginner)

I accept full responsibility for participation and relieve Atlanta International Table Tennis Academy. Coaches and practice partners of any liability resulting from injury to myself or my child or damage to my property.

Signature: _____

Date: _____

(Parent or Guardian required to sign for child under 18)