

# Universal Tennis Lessons – Academy

## 2021 HIGH PERFORMANCE JUNIOR DEVELOPMENT REGISTRATION (Intermediate and Advanced Competition Players Only)

Name \_\_\_\_\_ D.O.B \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_ Cell# \_\_\_\_\_ Office # \_\_\_\_\_

Email Address \_\_\_\_\_

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

Please check: Intermediate Player  or  Advanced Player; NTRP/UTR Rating \_\_\_\_\_

Lessons/Program Available (Make check payable and mail to: **John McLean**), P. O. Box 15685, Durham, NC 27704. **\*\*All fees are due before or on the day of the first program.**

**High Performance (HP) Tennis Clinic: Monday -Thursday, June 28 to July 29, 2021; 6:30 – 9:30 pm – Southern High School Tennis Courts, 800 Clayton Road, Durham, NC 27703.**

**Cost \$480.00 per person (non-refundable). Check payable to John McLean.**  
**Phone # 919- 323 -6366 <> 919-547-4354 (Voice mail box.) <> mclean2015@hotmail.com**

### **Medical Conditions/Medications:**

Please list any medical conditions that may affect your tennis play or activity during this clinic. Due to high heat temperatures or as a result of body changes below: (A physician **form** may be required for medical conditions). I certify that I **do** have medical concerns or  
\_\_\_\_\_ I **do not** have medical concerns. **List any additional information on back of form if needed.**

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If a player misses any days of the clinic, there will be no make-up time provided. However, we will provide make up dates for any missed or changed clinic days by the instructor as a result of weather conditions, schedule conflicts etc.

I, hereby, release John McLean - Instructor, staff and all affiliate instructors, the Durham-Orange Community Tennis Association, Southern School of Energy and Sustainability, Durham Parks and Recreation, USTA and all affiliates from any all responsibilities for illness or injury while traveling to and from; and participation in the above High Performance Clinic.

\_\_\_\_\_  
Signature of Participant: \_\_\_\_\_ Date

Print Name: \_\_\_\_\_

\_\_\_\_\_  
**Print Name and Signature of Parent/Guardian (if under 18)** \_\_\_\_\_ Date

Signature: \_\_\_\_\_