



## 2018 USTA Girls 14 National Clay Court Championships ENTRY SUPPLEMENT & RELEASE

Player Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Player Cell: \_\_\_\_\_

Parent Cell: \_\_\_\_\_ USTA Section: \_\_\_\_\_

Email Address: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

### EMERGENCY CONTACT DURING EVENT

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

**USTA RELEASE:** The USTA and the Tournament Committee requires a signed release covering all entrants in this USTA Girls' 14 National Championship. The entrant and the parent/guardian of any entrant who is a minor must sign the release. Acceptance of my entry in the USTA Girls' 14 National Championships ("Tournament") is without assumption or responsibility of any kind by the USTA, its sectional associates or committees, Plantation Community Tennis Corp., City of Plantation, Plantation Pro Shop Inc., or the management of the Tournament. In consideration of the acceptance of my entry, I do hereby for and on behalf of myself, and my heirs and my legal representatives release and forever discharge the USTA, Plantation Community Tennis Corp, City of Plantation, Plantation Pro Shop Inc., and its directors, officers, employees, agents, committees, and representatives and their successors and assigns, of and from any and all claims and demands of every kind, nature, and character which I may have or may hereafter acquire for any and all damages, losses, or injuries which may be suffered or sustained by me in connection with my activities during the period for which such permission is waived and released (including any period traveling to and from the Tournament), and I covenant not to sue therefore.

**Signature of Entrant:**

**Signature of Parent / Guardian:**

\_\_\_\_\_

\_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**MEDICAL RELEASE:** I hereby consent to the rendering of emergency first aid and other medical procedures which at the time of injury or illness seems reasonably advisable. I further understand that I will be responsible for payment of any such medical procedures. In consideration of the acceptance of my entry, I hereby agree to abide by all applicable rules and regulations and codes of the USTA and/or the same as may be adopted by the USTA for this USTA National Junior Championship, and hereby consent to be tested for drugs pursuant to the provisions thereof.

**Signature of Entrant:**

**Signature of Parent / Guardian:**

\_\_\_\_\_

\_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**PUBLICITY RELEASE:** I hereby give consent to the Plantation Community Tennis Corp., City of Plantation, and Plantation Pro Shop Inc. to use my name, picture likeness, and/or biographical materials for the promotion of the USTA Girls' 14 National Championship ("Tournament"), Plantation Community Tennis Corp., City of Plantation, Plantation Pro Shop Inc. and/or any of their programs and activities, including use on [www.plantation.org](http://www.plantation.org), [www.PCTC.PlantationTennis.org](http://www.PCTC.PlantationTennis.org), [www.plantationtennis.org](http://www.plantationtennis.org) and including any social media used by the above listed organizations. I hereby release and agree to hold harmless Plantation Community Tennis Corp., City of Plantation, Plantation Pro Shop Inc. from any and all claims of any kind which I, my heirs, executors and assigns, may have on account of the use of any photographs, videos, or any other media generated as a result of my participating in the Tournament.

**Signature of Entrant:**

**Signature of Parent / Guardian:**

\_\_\_\_\_

\_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**BRING THIS WAIVER TO PLAYER CHECK-IN**  
**\*\*DO NOT EMAIL, FAX, OR MAIL PRIOR TO ARRIVAL\*\***  
**Signed waivers are required for participation in the tournament.**