STTC Spring League

Registration Form:

(must be received by Wednesday March 3, 2010)

Name_____ Club Affiliation _____

Address_____ City_____ State _____ ZIP _____

Email_____Telephone_____ Rating_____

Elite _____ Recreational _____

Make checks payable to Shorewood Table Tennis Club

Entry fee:	Please Circle
STTC Member	$15.00
Non-Member	$30.00
Total fees:	

I assume all risk and responsibility for my participation in this League. I release any and all sponsors, the Shorewood School District, the Shorewood Table Tennis Club, USATT, the League directors, referees and any volunteers from any claims, actions, or demands for any loss, damage or injury sustained by my person or property. I understand and will abide by all USATT rules and regulations and the decisions of the League director.

_____ _____ _____

Signature of Participant *Print Name* *Date*

_____ _____ _____

Signature of Parent/Guardian if participant is under age 18 *Print Name of Minor Child* *Date*