

BERNARD MASTER JR. SATELLITE CIRCUIT Player Registration Form

Name: _____ Birthdate: _____

Street Address: _____ City: _____

Zip Code: _____ E-Mail Address: _____

Phone Numbers: _____ (Cell) _____ (Hm)

Adult T-Shirt Size: _____ Youth T-Shirt Size _____

Age Division (Circle): Enter division based on your age of **June 30, 2020**.

Boys & Girls combined 10 & under

Boys 12's Girls 12's

Boys 14's Girls 14's

Boys 16's Girls 16's

Boys 18's Girls 18's

Please make your \$40 check for registration fee as well as \$30/tournament entered payable to: Michelle Parish

And mail to: Michelle Parish
11485 St. Rt. 739
Marion, OH 43302

For info call: 740.528.2402

Read and sign below

Acceptance of my entry in this event is without assumption of responsibility of any kind by the Mid-Ohio Clubs listed, Michelle Parish, or Dr. Bernard Master, its officers, committees or management of any event in which I may be entered or participate. In consideration of the representatives and their successors and assigns, from any and all demands of every kind which I may or may hereafter acquire, for any and all damages, losses or injuries which I may sustain directly or indirectly in connection with said events, and all such claims are hereby waived and released and I covenant not to sue therefore.

Parents Name (Print)

***Signature of Parent or Guardian