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| **ATC 2021 Summer Season Membership****Registration for Junior Members****(May 1 to September 30)**  |

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**First Name (Junior #1):** **Surname:**

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|  P**lease circle - Gender:** Male / Female   |    |
| **Address:**  |  **City: Postal Code**: |
| **Telephone Number:**  |  **Email Address:**  |

 Do **Not** Publish Name, Telephone Number and/or Email Address (Email address required for online booking confirmation)

**First Name (Junior#2):** **Surname:**

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|  P**lease circle - Gender:** Male / Female   |    |
| **Address:**  |  **City: Postal Code**: |
| **Telephone Number:**  |  **Email Address:**  |

 Do **Not** Publish Name, Telephone Number and/or Email Address (Email address required for online booking confirmation)

**First Name (Junior #3):** **Surname:**

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|  P**lease circle - Gender:** Male / Female   |    |
| **Address:**  |  **City: Postal Code**: |
| **Telephone Number:**  |  **Email Address:**  |

 Do **Not** Publish Name, Telephone Number and/or Email Address (Email address required for online booking confirmation)

**Membership Fees**

Enter appropriate fee for membership class (see following page for payment details)

 **Fee**

Junior Membership Fee (**$55 + HST = $62.15/Junior**) **$**

 **Membership Fee (s) Total** **$\_\_\_\_\_\_\_\_\_\_**

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| Waiver, Anti-Harassment Policy, Code of Conduct and Assumption of Risk and Waiver of Liability Relating to Coronavirus / COVID-19I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby apply for membership at the Aldershot Tennis Club (ATC). During the tenure of my membership, I agree to abide by the rules, regulations, booking procedures, club policies, Code of Conduct and Anti-Harassment Policy of the Aldershot Tennis Club. I agree to ensure that any guest I bring to the club will be made aware of and comply with the club policies, Code of Conduct and Anti-Harassment Policy. The directors, staff, volunteers and their families, heirs and successors of the ATC are indemnified and saved harmless from the costs of any injury or loss of personal property sustained by any member, guest or family member thereof while on the premises or using the facilities of the ATC, however such injury or loss is caused. I acknowledge that members and their guests use the facilities at their own risk.***Refunds to members will be made at the discretion of the Board, supported by any required documentation supplied to the club. All medical leave requests must be accompanied by a doctor’s note. Memberships are non-transferable.*** This waiver & declaration must be completed prior to or upon visiting Aldershot Tennis Club (ATC) and before participating in any activity.The novel coronavirus, COVID-19 has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is known to spread mainly by contact from person to person. Consequently, local, provincial and federal governmental authorities recommend various measures and prohibit a variety of behaviors, in order to reduce the spread of the virus.Aldershot Tennis Club (ATC) and its members commit themselves to comply with the requirements and recommendations of Ontario National, Provincial and local Public health and other governmental authorities, and to put in place and adopt all necessary measures to that effect. However, Aldershot Tennis Club (ATC) cannot guarantee that you (or your child, if participant is a minor/ or the person you are the tutor or legal guardian of) will not become infected with COVID-19. Further, attending the Activities could increase your (or your child, if participant is a minor/ or the person you are the tutor or legal guardian of) risk of contracting COVID-19, despite all preventative measures put in place.By signing this document,1. I acknowledge the highly contagious nature of COVID-19 and I voluntarily assume the risk that I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of) could be exposed or infected by COVID-19 by participating in Aldershot Tennis Club (ATC)’s activities. Being exposed or infected by COVID-19 may particularly lead to injuries, diseases or other illnesses.
2. I declare that I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of) am participating voluntarily in Aldershot Tennis Club (ATC)’s activities.
3. I declare that neither I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of) nor anyone in my household, have experienced cold or flu-like symptoms in the last 14 days (including fever, cough, sore throat, respiratory illness, difficulty breathing).
4. If I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of) experience, or if anyone in my household experiences any cold or flu-like symptoms after submitting this declaration, I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of) will not attend any of Aldershot Tennis Club (ATC)’s activities, programs or services until at least 14 days have passed since those symptoms were last experienced.
5. I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of), nor has any member of my household travelled to or had a lay-over in any country outside Canada, or in any Province outside of Ontario, in the past 14 days. If I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of) travel, or if anyone in my household travels, outside the Province of Ontario after submitting this declaration, I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of) will not attend any of Aldershot Tennis Club (ATC)’s activities, programs or services until at least 14 days have passed since the date of return.
6. I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of) agree to the requirements and recommendations of National, Provincial and local Public health and other governmental authorities and to those special safety regulations put in place by Aldershot Tennis Club (ATC) as it pertains the Covid-19 Coronavirus and to adopt all necessary measures to those effects.
7. I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of) agree that, by filling out and signing this waiver and agreeing to the terms and conditions set out in it, I am giving up my legal rights to sue Aldershot Tennis Club (ATC) and its officers and directors, in the event that I (or my child, if participant is a minor/ or the person I am the tutor or legal guardian of), contracts the Covid-19 Coronavirus.

This document will remain in effect until Aldershot Tennis Club (ATC), as per the direction of the national, provincial and local government and health officials, determines that the acknowledgments in this declaration are no longer required. This document is in addition to and does not replace all other Aldershot Tennis Club (ATC) waivers.I HAVE SIGNED THIS DOCUMENT FREELY AND WITH FULL KNOWLEDGE.Name (s) of participant (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name of parent/tutor/ legal guardian (print) if participant is minor or cannot legally give consent) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature of participant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of parent/tutor/legal guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Place/Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Applicant’s/Parent Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

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| **Program registration information for Scheduled Club Leagues, Inter-Club Leagues, Clinics and Drop-in Round Robins can be found at PROGRAMS:** [About ATC – Aldershot Tennis Club](https://www.aldershottennis.ca/about-atc/)***Complete all sections of the application form scan and send pages 1 & 2 only via email to:*** membership@aldershottennis.ca ***or if paying by cheque/money order mail it with your payment to:***  **Aldershot Tennis Club - Membership** **Maplehurst P.O. Box 71112,** **Burlington, ON L7T 4J8** Contact: Malcolm Harris, Membership Director membership@aldershottennis.ca **Payment by eTransfer should be sent to:** membership@aldershottennis.ca **You may send one cheque/money order or eTransfer to cover all Junior registrations.** |
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