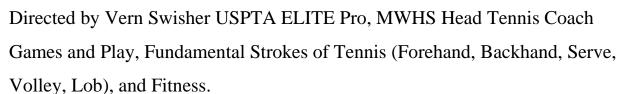
2019 MAGNOLIA WEST SUMMER TENNIS CAMP/June 3-6

Monday - Thursday @ Magnolia West

8:00-10:00 am Ages 7-12

10:00-12:00 noon Ages 13-18

Cost: \$70.00 (payable Vern Swisher)



Return form and payment to:

Coach Vern Swisher Magnolia West High School Mail Box



Any Questions?

Please contact Vern Swisher at

Email:vswisher@magnoliaisd.org Phone Number: 713-870-2299

Player's Name/	Grade in Fall 2019		
Address	City	Zip	
Home Phone	Parent Email		
Emergency Contact			
T-Shirt Size			

T-shirt size: Adult S M L XL Youth S M L XL

Parental Release:

I, the parent or guardian of the above mentioned minor, hereby grant permission for he/sh	ıe
participate in the MWHS summer tennis camp and further acknowledge that he/she is physically	
apable of participating in all strenuous activities. I understand that I bear the financial obligations	(O
ll injuries and ailments that might occur during these activities. We, the undersigned, hereby releas	se
ne Magnolia Independent School District, its employees, and all camp personnel, from all claims.	
arent/Guardian Signature:Date:	