



MIRA COSTA HIGH SCHOOL TENNIS TEAMS PRESENTS:  
**Costa Spring Break Youth Tennis Camp 2016**

**4/4/16 - 4/8/16**  
**9:30am - 12:30pm**

Campers: Boys & Girls ages 8 - 14

Location: Mira Costa High School Tennis Courts (corner of Artesia & Meadows)

Camp Director: Head Coach Joe Ciasulli and Assistant Coach Mark McGuire

Camp Counselors: Members of the Mira Costa Girls & Boys Tennis Teams

Cost: \$225/week, \$200/4 days, \$150/3 days, \$100/2 days, \$60/1 day (includes t-shirt & snacks)

Register: Please make check payable to "MBX Foundation" and mail along with registration form to:

**Costa Spring Break Youth Tennis Camp**

**Lori Gist**

**1427 19th Street, Manhattan Beach, CA 90266 OR**

**You may also sign up on line at [MBXFoundation.org](http://MBXFoundation.org)>booster clubs>fundraisers**

**DEADLINE: 3/25/16 (payment must be received by this date)**

Questions: Contact Kitty Fitzgerald at [kittydeansfitzgerald@gmail.com](mailto:kittydeansfitzgerald@gmail.com)

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Please circle days of attendance below (\$225/week, \$200/4 days, \$150/3 days, \$100/2 days, \$60/1 day):

**FULL WEEK - or - M T W TH F Total Amount \$** \_\_\_\_\_

**T-Shirt Size (Youth or Adult): Y-Sm Y-Med Y-Lg A-Sm A-Med A-Lg**

How did you hear about us? \_\_\_\_\_

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

Player Age: \_\_\_\_\_ Player Level (Beg., Inter., Adv.): \_\_\_\_\_

Parent Names: \_\_\_\_\_

Parent Email: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact Information: \_\_\_\_\_

I, \_\_\_\_\_, the undersigned parent or guardian of \_\_\_\_\_ do hereby grant permission for my child to participate, and to receive any necessary medical treatment in the event of an injury or illness. I do hereby release and discharge the coaches, counselors, organizers and sponsors of the camp as well as MBX Foundation, including their partners, Manhattan Beach Unified School District and each of their agents, officers and employees from any and all claims for losses, injuries, damages or liabilities, including personal injury and damage to personal property arising out of or attributable to participation in this event. I understand no refunds will be provided for missed days or withdrawal or early dismissal.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_