

**Tennis With Artie, LLC**

For additional information please contact:

Artie Yentumi (Coordinator/Coach)  
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Email: tenniswithartie@gmail.com  
www.tenniswithartie.com



**Waiver**

I/We, the undersigned hereby certify that I (we) am (are) the parent or legal guardian of the student. I hereby give permission for the staff of Tennis With Artie, LLC to seek during the tennis season appropriate medical attention for the student and for medical attention to be given and for the student to receive medical attention in the event of accident, injury, or illness. I will be responsible for any and all costs of medical attention and treatment, except for that covered by my insurance coverage and/or the student's excess medical coverage policy.

I/We, the undersigned, for ourselves and as guardian(s) of

..... (student's name) understand that tennis is an active, physical sport, and that injuries can take place during play. I/We also understand there will be a number of children at practices, there will be limited number of coaches and/or counselors, and that our child cannot receive individualized attention and supervision all of the time. I/We understand that, as with any sport, injuries can occur, and we hereby acknowledge that our child is physically fit and mentally capable of participating in tennis and tennis activities.

I/We represent that I/We have sought the opinion of our child's pediatrician

.....(Student's Physician) and he/she concurs

that, ..... (Student's Name) is fully capable of safely engaging in these activities. I/We also understand that it is my responsibility in caring for the student listed above, to be assured that he/she is fully capable of engaging in this sports activity, and I/we are confident that he/she is able to engage in such sport.

I/We, the undersigned for ourselves, our heirs, executors and administrators, waive, release and forever discharge Tennis With Artie, LLC and their respective staff, offices, agents, employees, representatives, successors, and assign of and from all rights and claims for damages, injury, or loss to person or property which may be sustained or occur during participation in Tennis With Artie, LLC activities whether or not damages, injury, or loss is due to negligence. I understand while participating in any activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

Signed: ..... (Student) Date: .....

Signed: ..... (Parent or legal guardian) Date: .....