

Registration Form for Grayson HOTP Tennis Classic

Name _____ (please print)

Phone # _____ email _____

Physical address _____

County _____ **City** _____ **ST** _____ **Zip** _____

Date of birth as of June 1, 2021 (for juniors and 40 + events) _____

Players will be asked to sign an injury/illness waiver and donation form.
Make checks payable to East Carter Tennis. All money is due before
your first match.

Singles Event(s) _____

Doubles partner & event _____

Mixed doubles partner & event _____

Parent/Grandparent-Child partner _____

Only 2 events are allowed.

Free item request: visor, towel, or t-shirt

Shirt size _____ and color request _____

ATS Member # _____

USTA # (Juniors) _____