

For more information, contact David Broida - dbroida@gmail.com or (610) 864-4303.



Please return this form and check, payable to Lower Merion Township, by mail, or in person
Monday - Friday 8:30 AM – 4:30 PM, to Lower Merion Parks and Recreation Department,
75 East Lancaster Avenue, Ardmore, PA 19003. Use one form per participant.

Name _____ Age _____

Street address _____ City _____ Zip _____

Home phone _____ cell _____

Emergency Contact & phone: _____

Medical Conditions/Allergies/Medications: _____

Physician's Name and phone: _____

E-mail (please print) _____

Class: Tennis Session # _____ Squash Session # _____

I, the undersigned hereby release the Township of Lower Merion, its officers, agents, employees, sponsors, organizers and all leaders assigned by them from all liability for any damage and injury to any person or thing in connection with the above activity. Furthermore, I hereby agree to refrain from bringing suit against any of the above named on my own behalf or on behalf of my son or daughter (named above) as a result of any damages or injuries o any person or thing that occurred in connection with the above activity. I also hereby agree to permit the video recording and/or photographing of this activity for the purposes of program advertisement by the Township of Lower Merion.

Parent/Guardian signature _____ Date _____ Business phone _____