

# SPTTC 2024 Mid-Winter Break Camp Registration

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

School Name: \_\_\_\_\_

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

Email Contact: \_\_\_\_\_

Parents Name: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

**Date want to attend (Please circle the date)**

02/19/2024 - 02/23/2024

- Table Tennis Only       Table Tennis with Chess 4 life  
 Table Tennis with Gong Fu

**Special Note (if any)**

\_\_\_\_\_

**Emergency contact if parent or guardian is not available:**

Name/Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Signature of Parent or Legal Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

**Enclosed Check #:** \_\_\_\_\_ **Amount:** \_\_\_\_\_