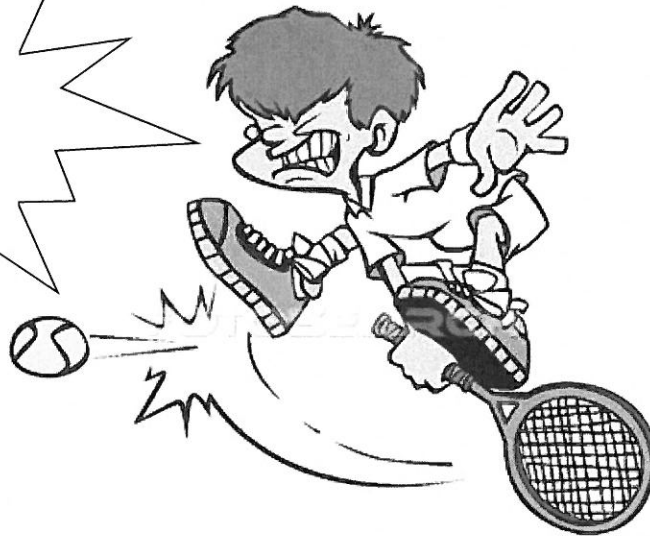


# Swinging with the Eagles Night

All proceeds will be  
donated to the Red  
Cross for Hurricane  
Harvey relief



**What:** Come hit with the Eagles tennis team and enjoy a pizza party afterwards

Students will take part in fun games while learning the game of tennis and being taught the proper form and technique for playing tennis. The high school coaching staff will be introducing skills and drills and working with students, alongside current high school players.

***\*\*\*Students must bring their own racquets\*\*\****

**When:** Friday afternoons from 4-5:30pm (9/8, 9/15)

**\*\*\*Please RSVP to [pgornik@dunlapcusd.net](mailto:pgornik@dunlapcusd.net) by Thursday of that week if your child is able to attend, so we may plan our event\*\*\***

**Who:** Any student in K - 8<sup>th</sup> grade

**Where:** Dunlap High School courts (behind Dunlap M.S. & the football field)

**How much:** \$5 per child per week (Bring **Exact** payment at time of drop-off)

Please contact Coach Pat Gornik ([pgornik@dunlapcusd.net](mailto:pgornik@dunlapcusd.net)) with any questions.

# Dunlap Eagles Elementary Night

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## REGISTRATION FORM

Participant Name (Last, First, MI) \_\_\_\_\_ Gender \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade in 2017-18 \_\_\_\_\_

Participant level of experience (Circle one)    Beginner    Lessons \_\_\_\_\_ (How often)    Tournament \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

Parent Email \_\_\_\_\_ Parent name \_\_\_\_\_

Parent Email \_\_\_\_\_ Parent name \_\_\_\_\_

**Additional camper names & grades**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TOTAL AMOUNT ENCLOSED (\$5/camper) \_\_\_\_\_

**Please make checks payable to Dunlap High School**

**Please direct any questions to Patrick Gornik at [pgornik@dunlapcusd.net](mailto:pgornik@dunlapcusd.net).**

*Medical Release and Liability Information: I (we) the parent(s) or guardian(s) of the above named child(ren), hereby give my (our) approval to his/her participation in the 2017-18 school year Dunlap High School Tennis Elementary Nights. I (we) assume all risks and hazards, incidental to such participation, excluding none. I (we) waive, release, absolve and agree to hold harmless Dunlap School District, Dunlap High School and all officers, organizers, sponsors, supervisors, participants and parents transporting my (our) child(ren).*

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

- \_\_\_\_\_ I consent for pictures of my son/daughter/dependent to potentially be used to advertise future Dunlap tennis events
- \_\_\_\_\_ I do not consent for pictures of my son/daughter/dependent to be used for future advertising by Dunlap tennis events