



# GILBERT TABLE TENNIS CENTER

## Kids and Juniors Registration Form

*(If enrolling more than one child, include information for both)*

Name of Child: \_\_\_\_\_

Child's Age: \_\_\_\_\_

Name of Parent of Guardian: \_\_\_\_\_

\_\_\_\_\_

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

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

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

\_\_\_\_\_

Working E-mail: \_\_\_\_\_

Preferred Session Length: (check one)

One Month

Three Month

Private Lessons

Additional Notes or Requests: \_\_\_\_\_

\_\_\_\_\_

Fax to: 323-933-9368