



2011 SUMMER CAMP REGISTRATION FORM

Student Information

Name: _____ Age: _____ Gender: M F DOB: _____

Parents' Names: _____

Address: _____

City/State/Zip: _____

E-mail: _____

Home Phone: _____ Cell: _____

USTA Section: _____ Ranking: _____ USTA #: _____

Parent/Guardian Information

Father's Full Legal Name: _____

Home Address: _____

City: _____ State: _____ Postal Code: _____

Home Phone: _____ Cell: _____ Fax: _____

Email Address: _____

Mother's Full Legal Name: _____

Home Address: _____

City: _____ State: _____ Postal Code: _____

Home Phone: _____ Cell: _____ Fax: _____

Email Address: _____

Camp 1: *Tournament Training Camp* for regional and sectional ranked player

Camp 2: *Summer Tennis Camp* for the intermediate, high school or non-ranked player

Camp Weeks: 1 2 3 4 5 6 7 8 9 10 11 12

info@isatennisacademy.com

1751 Orange Blossom Way, Encinitas, CA 92024 • Tel: (760) 402-9626 • Fax (858) 771-1180 • www.isatennisacademy.com

Payment Information

Credit Cards

We require that you have a valid credit card on file with our office in order to pick up any incidental and emergency charges. We will notify you of any charges to this card **PRIOR** to making any charges, **except** in the case of an emergency. In the case of a medical or other emergency, we will notify you of charges as soon as possible after the charge. You may request that we bill this card for certain reoccurring and one time charges- please indicate below which charges you would like billed to this card.

Please bill the following charges to the credit card listed below, and on file with your office:
(please initial)

_____ Full tuition & fees (pre-paid in full)

_____ Leisure and entertainment charges: (amusement parks, tickets, etc.)

By filling out and signing this form, you are accepting and agreeing to the terms and conditions set forth above.

Visa _____ MasterCard _____ Discover _____ Amex _____

Name on Card: _____

Card Number: _____

Expiration Date: _____

Security Code: _____

Amount: \$ _____

Signature: _____ Date: _____

Check Payments

Please make checks payable to **ISA Academy**. Send check with completed enrollment documents to:
ISA Academy
1751 Orange Blossom Way
Encinitas, CA 92024

**Whether paying by credit card or check, add all camp costs and fees, including optional and extra costs, to determine total amount due ISA Academy.*

Refunds

Full payment must be made in advance. Full refunds of tuition will be given for cancelations up to two weeks prior to the camp start date. Cancelations less than 14 days prior to start date will receive 50% refunds. No refund will be given after the camp start date. Any optional or extra costs, above and beyond camp tuition, will **ONLY** be refunded in full for cancelations prior to the start date.

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