

MILFORD COMMUNITY SCHOOL USE PROGRAM

TOWN-WIDE TENNIS LADDER

REGISTRATION FORM

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_

INDICATE PLAY CHOICE(S):       SINGLES       DOUBLES

NAME OF DOUBLES PARTNER (if applicable) \_\_\_\_\_

SKILL LEVEL:     BEGINNER     INTERMEDIATE     EXPERIENCED     ADVANCED

PLAYER CONTACT INFORMATION – Preferred telephone, email, and text message number for other players to contact you.

TELEPHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

TEXT MESSAGE NUMBER \_\_\_\_\_

**FEE:**            \$10 Per Player/ Per Program (Checks payable to Milford Community Program)

**MAIL TO:**    MILFORD COMMUNITY SCHOOL USE PROGRAM  
                  31 West Fountain Street  
                  Milford, MA 01757-4098

PLAYER'S SIGNATURE \_\_\_\_\_

**If Player is under 18 years of age**

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_

If you have any questions, please call (508) 478-1119 Monday through Friday 8:30 – 3:30 pm.