

2008 CAPE COD JUNIOR TENNIS SERIES APPLICATION

NAME OF PARTICIPANT _____

ADDRESS _____

HOME PHONE _____ CELL PHONE _____

E-MAIL _____

EVENT _____

BIRTH DATE _____ AGE AT TIME OF COMPETITION _____

FEE ENCLOSED \$ _____ (Make checks payable to Willowbend or King's Grant depending on where your child is scheduled to play.)

BRIEF TENNIS HISTORY (ranking, USTA experience, beginner, etc)

Mail to the location of the event:
Andy Berler, 110 Willowbend Drive, Mashpee, MA 02649
or
John Maloy, P.O. Box 153, Cotuit, MA 02635