

# 2025 Pickleball Camp Mission Township Park & Rodrigo Reyes Pickleball Camp

Mission Township Park, County Rd 11 & Mission Way  
Crow Wing County, MN

NAME \_\_\_\_\_

PERMANENT **MAILING** ADDRESS \_\_\_\_\_

CITY\_STATE\_ZIP \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_  
(Please write **LEGIBLY**; correspondence will be primarily by email)

HOME # \_\_\_\_\_ SUMMER/CELL # \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ EMERGENCY PHONE \_\_\_\_\_

SKILL LEVEL (CIRCLE ONE): 3.0-3.5      3.75 - 4.0+

SESSIONS (CIRCLE ONE):      S1      S2      BOTH S1 & S2

## **WAIVER OF LIABILITY AND ASSUMPTION OF RESPONSIBILITY**

All registrants MUST read and sign this waiver before participating in the pickleball camp:

I hereby waive and release any and all rights and claims that I may have against Mission Township, its servants, agents, or employees, for any and all injuries or other damage arising out of or connected with participation in the above activities. I further agree and consent to emergency treatment of myself by a physician or hospital.

Participant Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

PLEASE SEND YOUR REGISTRATION TO THE EMAIL BELOW:

[Coachrodrigoreyes@gmail.com](mailto:Coachrodrigoreyes@gmail.com)

### **Method of payment:**

- Venmo – @LuisRodrigo-Reyes
- Zelle – 405 898 5488
- Apple Pay – 405 898 5488
- Cash (Full amount first day of camp)

### **Office Use Only:**

Fee Paid (Y/N) \_\_\_\_\_ Amount Paid \_\_\_\_\_ Date \_\_\_\_\_ Venmo, Zelle, Apple Pay, Cash, Check \_\_\_\_\_