

USPTA PLAYER DEVELOPMENT CONFERENCE

"Spanish Way to Develop Players"

December 4-6, 2008 Naples, Florida

Registration Form

COACH DATA					
Participant's Name:		First Name		Middle Initial	
Date of Birth:		Age:			
Address:					
City:	State:	Zip:	Country: _		
Work Phone #: ((Please include Country and	City Codes)	Fax#: ()		
Cell Phone#: () I	E-mail:			
Name of Club / Acader	my / College where you wo	ork at:			
ENROLLMENT					
I.				, do hereby	
confirm my enrollment December 4, 5 & 6, 20		elopment Conference "S	panish Way to	, do hereby Develop Players" to take place on	
Signature					
Conference Cost: US	\$ 300 (Non USPTA) or 250	(USPTA). A \$100 adva	nce reservation	fee requiredl)	
Reservation Payment N	Method (\$ 100):				
☐ Check #	(must b	oe drawn on US bank). I	Mailed to:		
		Academia Sanchez-Ca Naples Tennis Club 4995 Airport Road <i>No</i> Naples, Florida 34105,	b rth		
☐ Credit Card: V					
Card #		Exp. Date:	/		
Name on 0	Card # Exp. Date: / Name on Card:				
Signature:		Date:	onth Day	Year	
☐ Wire Transfer ((please send the copy of W	//T fax number 239 261	6998)		
***PLEASE NOTE: BE Full-Time Participants: spending account. Pro paid by the sender. T	cessing fees incurred dur	ANT'S NAME IS ON THE by wire, please specifing the transfer of more to your account by A	fy your deposit nies as they cle cademia Sánch	breakdowns in tuition and personal ear through all banking channels are ez-Casal is the exact dollar amount opy of deposit or transfer)	
The Private B Naples Tennis Routing # 07:)3			
Signature:		/ Date:/	/		
If faxing registration	n: 305-554-1124	If Mailing: Academi Naples 4995 Airp		1	