JUNIOR TENNIS REGISTRATION FORM

CIRCLE SESSION ENTERING

SESSION 4– FEBRUARY 11TH – APRIL 14TH (7 WEEKS)
SESSION 5– APRIL **7**TH – MAY 23RD (7 WEEKS)

NAME:_____ PHONE #:(_____) _____ - _____

BIRTHDATE:___/___/____ AGE:_____ E-MAIL ADDRES_____

ADDRESS:_____ CITY:_____ ST:_____ ZIP:_____

PROGRAM ENTERING:_____ DAY(s):_____ TIME:_____

FORM of PAYMENT: On Account Credit Card Check Cash

*T-shirts $10.00 each x_____=$_____ (write how many extra t-shirts you would like to order)

*Registration Fee $_____ ($25 for one child or $40 per family)

*Class Fee $_____

TOAL AMOUNT PAID: **$_____**

CIRCLE T- SHIRT SIZE: Adults size: L M S Kids size: L M S

A one time non-refundable registration fee (included Session 1, 2, & 3 in 2007, and 4 & 5 in 2008) is required at the time of registration. This fee is $ 25 for one child or $ 40 per family, which is non-applicable towards Academy dues. Price covers materials used during Academy and **includes one T-shirt!**

TENNIS PROGRAM POLICIES

*ALL SIGN-UPS SHOULD BE MADE WITH COMPLETED REGISTRATION FORM AND FULL PAYMENT BY THE **THURSDAY PRIOR TO THE BEGINNING OF THE SESSION.**
*A **$10 LATE FEE** WILL BE ASSESSED TO ANY STUDENT REGISTERING AFTER THIS DATE.
*THERE IS A 20 % NON-MEMBER FEE
***ALL DELINQUENT ACCOUNTS** WILL BE **CHARGED** TO THE **STUDENT'S MEMBERSHIP ACCOUNT** AFTER 1 WEEK OF CLASS. NON-MEMBERS WILL NOT BE ALLOWED TO ATTEND CLASS UNTIL BALANCE IS PAID IN FULL.
***NO REFUNDS** WILL BE GIVEN **AFTER THE SECOND WEEK** OF CLASS.
*IF RAINOUTS OCCUR, YOU WILL BE ABLE TO MAKE IT UP WITHIN THE SESSION.
*PLEASE CALL THE CLUB 1/2 HOUR BEFORE CLASS TO FIND OUT IF A CLASS HAS BEEN CANCELLED DUE TO THE WEATHER.
*ANY QUESTIONS SHOULD BE DIRECTED TOWARD FEDERICO PALOMBO AT **643-3500** OR **FEDERICO@CROSSGATESCLUB.COM**

* Daily Rates Available (Sign up needed) ½ - $10 1 hour - $15 1.5 hour - $20

WAIVER & INDEMNITY AGREEMENT:
Acceptance of entry into these programs is without responsibility of any kind by Cross Gates Athletic Club, its associates, or any other entity sponsoring the event. I do hereby, for and on behalf of my heirs, my legal representatives, and myself release and forever discharge Cross Gates Athletic Club, it's associates, or any other entity sponsoring the program from any claim of injury howsoever arising. The student over 17 years of age, parent, and or legal guardian, by signing below does hereby agree to indemnify and hold harmless Cross Gates Athletic Club, it's associates, and sponsoring firms from any liability, which may occur to the entrant during the programs.
Signature of Parent/Guardian:_____Date:____/____/____