



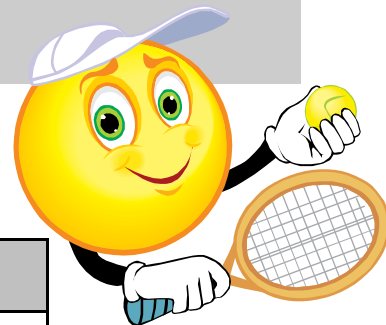
325 Bedford Street, Rte 18  
Lakeville, MA 02347

Phone: 508-947-8088  
www.lakevilleathleticclub.com

# YOUTH TENNIS PROGRAM

## 2011-2012 Academic Year

- ⇒ No previous experience required
- ⇒ Develop hand-eye coordination, fitness awareness, self-esteem, & confidence
- ⇒ JR racquets available for purchase (appropriate tennis footwear & attire needed)



AGE	DAY	TIME	RATE
5 - 6	Tuesday	4:00 - 5:00 PM	\$158 / student
6 - 7	Monday	4:00 - 5:00 PM	\$158 / student
8 - 9	Thursday	4:00 - 5:00 PM	\$158 / student
10 - 12	Monday	4:00 - 5:00 PM	\$158 / student
13 & up	Thursday	4:00 - 5:00 PM	\$158 / student

**Advance  
Registration  
and  
Payment  
Required**

Classes held on individual holidays & half days!

**Session 1:** 9/12/11 - 11/3/11  
**Session 2:** 11/7/11 - 1/19/12  
**Session 3:** 1/23/12 - 3/22/12  
**Session 4:** 3/26/12 - 5/24/12  
**Session 5:** 5/29/12 - 6/14/12 (prorated pricing for shorter session)

Each session is  
8 weeks

***No classes weeks of: 11/21, 12/26, 1/2, 2/20, & 4/16 !***

**Please Note:**

1. Class size is determined & monitored by tennis instructor (3 needed for class).
2. There are no make ups for missed classes; no credits or refunds will be given.



**----- COMPLETE AND RETURN WITH PAYMENT -----**

**Front Desk: Payment \$** \_\_\_\_\_  Check # \_\_\_\_\_  Credit Card  Cash  
 Staff Initials: \_\_\_\_\_ Date Received: \_\_\_\_\_

**Session (circle one):**    1    2    3    4    5  
**Youth Tennis Program**

**Day Attending (circle one):**    Mon    Tues    Thurs  
 (authorization needed to change days)

Name \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_

**Waiver and Release:**

I give approval for my child's participation in the Youth Tennis Program. I assume all risks and hazards incidental to his/her participation in Youth Program activities. I hereby waive, release, absolve, indemnify and agree to hold harmless the Lakeville Athletic Club and its representatives for injuries, damages or losses.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_