



Friends of the Mel Stillman Community Tennis Center
 CHAD Tennis - Summer Program 2024
CHAD Little Wonders

9:00 – 10:30 am and 10:45 – 12:15 pm

Introductory tennis skills and games in a fun outdoor environment

Please bring a snack, sunscreen, hat, and water every day!

\$200.00 per week per session or \$50.00 per day, per session – **NO DROP INS!!!**

Week of July 1st is \$160.00, no clinic on July 4th - **If it rains, there is no program**

Name of Attendee: _____ Age _____ Male: _____ Female: _____

Parent/Guardian Name: _____ Email _____

Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Emergency Contact: _____ Emergency Phone: _____

Week	Entire Week 9:00	Entire Week 10:45	Mon 9:00	Mon 10:45	Tues 9:00	Tues 10:45	Wed 9:00	Wed 10:45	Thurs 9:00	Thurs 10:45	Fri 9:00	Fri 10:45
July 1 st – July 5 th									Holiday	Holiday		
July 8 th – 12 th												
July 15 th – 19 th												
July 22 nd – 26 th												
July 29 th – August 2 nd												
August 5 th – 9 th												
August 12 th – 16 th												
August 19 th – 23 rd												
August 26 th – 30 th												

Balance Due _____ () Check to Friends of MSCTC () Credit Card _____

Exp. Date _____ Sec Code _____ Zipcode _____

***Please mail registration with payment to Susan Wynn – 254 Main Street, Charlestown, MA 02129
 or email to stillmantennisrsvp@gmail.com. Questions - call Susan Wynn 617.306.4127***

Participant hereby agrees to indemnify and hold harmless Friends of MSCTC and its staff, directors, volunteers, members and representatives from any and all harm arising from participating in any and all program activities, including, but not limited to tennis. _____ (initial). I, _____, (parent/guardian) give my permission for Friends of MSCTC to attain emergency medical treatment for my child in the event I cannot be reached. Friends of MSCTC have my permission to use photos of my child in promotional and educational literature. _____ (initial if you give permission). Friends of MSCTC will refund 100% of all fees (minus \$25 per week per child registration fee) if canceled by July 1, 2024. After July 1, 2024, refunds will only be given for medical reasons verified by a doctor's note. There are absolutely no refunds or credits for missed days or weeks. Friends of MSCTC reserves the right to dismiss any participant whose conduct is detrimental to the overall good of the program. In cases of gross misconduct, illness or accident, no refund will be made. No deduction is allowed for late arrival or early departure. Friends of MSCTC maintains the highest safety standards; however, it does not assume liability for accidents, illness, or disease. _____ (initial)

Signature of Parent or Guardian: _____ Date: _____