

Tennis Sized Right for Kids! For ages 5 - 10 UNDER 10 TENNIS 2019

2 SEVEN WEEK SESSIONS

[] SESSION 1: September 16 - November 3 (no class: Thu. 10/31 Sun. 11/3) please prorate

] SESSION 2: November 4 - December 22 (no class: Thu. 11/28) please prorate

[] SAVE 10% - PREPAY FOR BOTH SESSIONS - before the first class of Session 1

[] Level 1: 36' Court, Foam/Red Ball - Divided into 3 levels (1A, 1B, 1C). Students will learn skills that will become the foundation of their tennis development. Balance, coordination and motor skills, reception and projection activities will be introduced along with the development to be able to judge the ball and focus on partner rallying skills.

[] Level 2: 60' Court, Orange Ball & 78' Green Ball - Divided into 3 levels (2A, 2B, 2C). Students will develop tactical & technical skills, develop topspin and consistency, direction and depth. Concepts of offense and defense for both singles and doubles will be introduced along with competitive play situations.

Rates per Session	Choose up to 2 Days per Week	
[] 1 Day/Wk \$154 [] 2 Days/Wk \$308	 [] Mon 4:00 p.m 5:00 p.m. [] Mon 5:00 p.m 6:00 p.m. [] Tue 6:00 p.m 7:00 p.m. [] Thu 6:00 p.m 7:00 p.m. [] Sun 2:30 p.m 3:30 p.m. 	

STUDENT REQUIREMENT: Please register before the start of the session.

Registration form must be completed and accompanied with payment. Class sizes are limited & applications will be accepted in order of receipt. Registrations will be taken after the start of the session if spaces are available.

MAKE UP POLICY:

A spot is held for your child for the class you choose for the entire session.

Courts and appropriate staffing are set before the start of the session. A request, in advance, for a make up class will be accommodated in order of receipt. We will try to accommodate all requests. (A make up due to a no show, without notice, may not be available).

Please contact Debbie Miller - debbie millertenniscenter@gmail.com

Please advise us on any special needs that your child requires to ensure the best tennis experience possible.

Name	_D.O.B//Age	Phone	_ Cell
Address	_City	State	Zip
Email			

Payment Method: []Cash	[]Check	[] Credit Card	[] MTC Acct Credit Ca	rd on File Required
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Photography may be taken for marketing purposes - [] I give permission [] No, I prefer not to have photos taken