

Ridgefield Tennis Club

FALL/WINTER JUNIOR CLINIC PROGRAMS

Our 37-week session runs September 9, 2010 through Jun 12, 2011.

(No clinics 11/25 -11/28 & 12/21 - 01/02 & 5/30)

PROGRAM COST: (minimum 19wk commitment – Fall Session)

37 week session:	1 hr - \$34/wk	1 ½ hr - \$48	Matchplay - \$16/wk
19 week session	1 hr - \$36/wk	1 ½ hr - \$50	Matchplay - \$18/wk

Please circle which session and class you are signing up for

*Note: one registration form per child

Parent Name: _____ Home #: _____ Cell #: _____

Address: _____ State: _____ Zip: _____ Email: _____

Child's Name: _____ DOB/Age: _____

Day Requested: _____ Time: _____ Skill level: _____

\$150 non-refundable deposit per clinic:

I hereby release Ridgefield Tennis Club from any and all claims and liability of any kind resulting from injury due to participation in activities at Ridgefield Tennis Club.

Child's Guardian Signature: _____ Date: _____

Please check and sign which payment plan you prefer for your Junior Clinic balance:

- I authorize Ridgefield Tennis Club to put the balance of the Junior Clinic on *AUTOPAY* (6 monthly payments for 37-wk or 3 monthly payments for 19-wk) deducted directly from my credit card or checking account, starting September 1st.

Credit Card # _____ Exp date: _____ Security Code: _____

Bank Name: _____ Routing #: _____ Checking Account #: _____

Signature: _____ Date: _____

- I agree to pay in *FULL* for the balance of this Junior Clinic, due in full by 8/15/10.

Signature _____ Date _____