

Registration Form for Junior Tennis Clinics at Scranton Tennis Club

Name _____ Age _____

Parent/Guardian _____

Phone _____ Alt Phone _____

Email _____

T-Shirt Size Child: M, L, XL; Adult: S, M, L, XL (please circle appropriate size)

Please check off session and class registered for:

Tuesday- Thursday PM Junior Clinics:

First Session: June 18 thru July 11*. _____

Second Session: July 16 thru August 1. _____

12:30-2:00 pm Tennis Basics _____

12:30-2:00 pm Tennis Futures _____

12:30-2:00 pm Tournament Training _____

Monday-Wednesday PM Junior Clinics:

First Session: June 17 thru July 10*. _____

Second Session: July 15 thru July 31. _____

12:30-2:00 pm Junior Aces _____

2:00-3:30 pm Hot Shots _____

Previous instruction and playing experience: _____

Cost: \$150 for one session (6 lessons), \$285 for two sessions (12 lessons) if paid in full at the time of registration, check payable to Joe McNulty

** There will be no classes the week of July 1-4.*

For both groups, students register by making out a check to Joe McNulty and sending it with this registration form to Kathleen McKenna at 608 Highland Ave, Clarks Green, PA 18411 Junior clinics are non-refundable and non-transferable. Students will be admitted to the classes in the order in which their checks are received.

RELEASE: (Parent/Guardian must sign)

I/we will not hold any individual associated with the Scranton Tennis Club, its pro and his staff, any volunteers, or its Board of Directors responsible for any accident or injury incurred by my child while attending the Scranton Tennis Club.

Parent/Guardian signature: _____

Amount Remitted: Cost of Clinic(s) \$ _____ less: value of coupons: \$ _____ = \$ _____