2012 WINTER JR TENNIS PROGRAM

at the Snively Tennis Gym – 425 West Main Street, Olney IL 62450

Session I – Wed. Jan. 4th – Tues. Jan. 31st **Session II** – Wed. Feb. 1st – Tues. Feb. 28th
Session III – Thu. Mar. 1st – Wed. Mar. 28th
(circle appropriate group and each session your child will attend)
MAKE ALL CHECKS PAYABLE TO: ***DARREL SNIVELY***

Beginners Cost per single session is $60.00 Sessions

Mondays & Wednesdays & Fridays– Ages 6-12 – 3:30pm-4:30pm I II III

Intermediate Cost per single session is $75.00

Tue. & Thur. 3:30pm-5:00pm & Fri. 4:30pm-5:30pm – Ages 7-13 I II III

Young Advanced Cost based on average weekly attendance $55.00 up to $75.00

Mon. & Wed. 4:30pm-6:00pm & Fri. 5:30pm-7:00pm – Ages 7-13 I II III

High School Advanced Cost based on average weekly attendance $55.00 up to $100.00

Mon. & Wed. 6:00pm-7:30pm – Tue. & Thur. 5:00pm-7:00pm – Ages 14-18 I II III

Both Advanced Groups INCLUDE Additional PRIVATE INSTRUCTION PER SESSION
Cost per session is $55 for 1-1.75 average; $75 for 2-2.75 average; $90.00 for 3-3.75 average; $100 for 4-5 average
All prices are per session. Must average: 2.5 to receive 2 hrs of PI; 3.5 to receive 3 hrs of PI; 4.5 to receive 4 hrs of PI
Daily Rate is $15/day for less than 1.0 Average Weekly Attendance

25% OFF PER SESSION FOR EACH ADDITIONAL CHILD IN SAME FAMILY

REGISTRATION FORM

Tennis Student's Name _____ GENDER____ DOB_____ Age_____

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Parent's / Guardian's Name _____

Mailing Address _____ _____ ___ _____
Street Address City State Zip

Home PH# ____-_____ Work PH# ____-_____ Cell PH# ____-_____

E-mail address _____ **Does your child need a racket?** _____

All balls and other training aids will be provided. Shoes should be smooth sole with non-marking composition.

Does your child have any special medical considerations? _____
The emphasis of this program is to introduce the game of tennis in a fun environment while building solid fundamentals with the ultimate goal of getting the program participants started playing and competing.

PLEASE READ AND SIGN THE WAIVER ON THE OTHER SIDE

YOUTH TENNIS PROGRAM WAIVER AGREEMENT

In consideration of being permitted to participate in any way in the 2012 WINTER Junior Tennis Program (***WJTP***) I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue WJTP, its officers, employees, and agents from liability from any and all claims including the negligence of WJTP, its officers, employees and agents, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to participation in WJTP.

Assumption of Risk: Participation in WJTP carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary and range from minor injuries such as scratches, bruised, and sprains to major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks and concussions to catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in WJTP. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I agree to defend, indemnify, and hold harmless WJTP from and against any and all loss, liability charges, actions, claims, suits, and expenses (including attorneys fees) and cost which may arise by reason of participation in WJTP. (WJTP does not provide any insurance for program participants).

RELEASE AUTHORIZATION FOR EMERGENCY TREATMENT: I understand that I am required to maintain and carry accident medical insurance coverage for the child listed on their application and I verify that the coverage information attached herewith is accurate and true. As parent/guardian, I hereby consent to emergency treatment of my minor child as a result of accident or injury.
I further agree to pay any and all costs incurred as a result of said treatment. I further agree to expressly assume the risk of my minor child participating in WJTP.

I am the parent/guardian of the minor _____ and I am signing this release on behalf of said minor.

I HAVE READ THE ABOVE EMERGENCY AUTHORIZATION, WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, fully understand its terms and understand that I am giving up substantial rights by agreeing to these terms, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature and agreement to be a complete and unconditional release of all liability to the greatest extent allowed by law.

_____ _____ _____
Parent/Guardian Printed Name Signature Date

Please return this signed form and send payment to:

Darrel Snively, PO BOX 695, Olney IL 62450

OR

E-mail the Registration Form's basic information to Darrel's e-mail address:
darreluss@yahoo.com

You can pay and sign the waiver later!

PLEASE E-MAIL ME AS SOON AS POSSIBLE IF YOUR CHILD OR CHILDREN PLAN TO PARYICIPATE IN THE 2012 WINTER JR TENNIS PROGRAM….DDS

Make all checks payable to: **Darrel Snively**

QUESTIONS?? – PHONE 618-838-TNIS (8647) or Check Out www.darrelsnively.com

**********RGISTRATION USE ONLY**********

AMOUNT PAID $ _____

Date _____ Amount Pd. _____ Check # _____ Cash _____

PDF of the info above