



# TOTS TENNIS

**AGES 3-4 | 3:30PM-4PM**

**LEARN THE TENNIS BASICS WITH AN  
EMPHASIS ON FUN AND MOVEMENT**

TO REGISTER CONTACT TIM TUNIS  
TTUNIS@WEYMOUTHCLUB.COM

REGISTRATION FORM  
ON BACK



# REGISTRATION

Child Name: \_\_\_\_\_ Child DOB: \_\_\_\_\_ Member  Nonmember

Clinic Name: \_\_\_\_\_ Clinic Day(s)/ Time: \_\_\_\_\_

Parent/ Guardian Name: \_\_\_\_\_ Permanent Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

CC#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ exp: \_\_\_\_\_ / \_\_\_\_\_ cvv: \_\_\_\_\_ Use COF:

## Step 1: Choose Weeks

- |   |  |
|---|--|
| <input type="checkbox"/> Week 1: June 22 & 24     | <input type="checkbox"/> Week 6: July 27 & 29    |
| <input type="checkbox"/> Week 2: June 29 & July 1 | <input type="checkbox"/> Week 7: August 3 & 5    |
| <input type="checkbox"/> Week 3: July 6 & 8       | <input type="checkbox"/> Week 8: August 10 & 12  |
| <input type="checkbox"/> Week 4: July 13 & 18     | <input type="checkbox"/> Week 9: August 17 & 19  |
| <input type="checkbox"/> Week 5: July 20 & 22     | <input type="checkbox"/> Week 10: August 24 & 26 |

## Step 2: Choose Attendance

- FULL Week  
Monday & Wednesday  
Members | \$32/week  
Nonmembers | \$40/week
- INDIVIDUAL DAY *(Choose one)*
- Monday  Wednesday  
Members | \$18/day  
Nonmembers | \$24/day

## PROGRAMMING POLICIES

*For any scheduling questions please email [ttunis@weymouthclub.com](mailto:ttunis@weymouthclub.com)*

1. Full payment must accompany the registration form, and weekly sign-ups must be made the Wednesday prior to the chosen clinic. Parents must have a valid credit card on file.
2. There are **no refunds or makeups** for scheduling conflicts or missed classes (including but not limited to sickness or minor injury).

Players assume risks and hazards incidental to participants in this program and waive, release, absolve, indemnify, and agree to hold harmless Weymouth Club and its representatives for injuries, damages, or losses. Each student may decline to participate in any activity which may be harmful, and is also responsible to inform the instructor, in writing of any physical limitations which may prevent full participation in class or any associated event. Fees are non-refundable (since enrollment is closed when full). My signature represents the release of all liability as stated above.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_