



PARK COLONY CLUB

2018 Kids Tennis Lessons

Summer Tennis at the scenic and safe environment of the Park Colony Swim/Tennis Club will be a great choice for your children's tennis experience. This private club is surrounded by a fenced in tree lined perimeter with tennis courts and outdoor pool in full site. Lessons will be run by Grace Menna USPTA Elite Professional/Cell: 313.268.2506 (please text)

All Classes will run Tuesday, Wednesday, and Thursday. Rainout day is Friday.

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| <input type="checkbox"/> Session 1: June 19, 20, 21, 26, 27, 28 | 9:15am-10:15am: Ages 5-8 | 10:15am-11:45am: Ages 9-14 |
| <input type="checkbox"/> Session 2: July 3, 4, 5, 10, 11, 12 | Members: \$42 (\$7 per lesson) | Members: \$42 (\$7 per lesson) |
| <input type="checkbox"/> Session 3: July 17, 18, 19, 24, 25, 26 | AP Resident: \$48 (\$8 per lesson) | AP Resident: \$54 (\$9 per lesson) |
| <input type="checkbox"/> Session 4: July 31, August 1, 2, 7, 8, 9 | Non Members: \$54 (\$9 per lesson) | Non Members: \$60 (\$10 per lesson) |

All lessons must have a minimum of 6 and maximum of 12 children sign up. We also offer private single or group lessons which you can arrange with Grace. {All lessons could be subject to change}

There will be mixers with challenge matches included scheduled throughout the summer

Make checks payable to Park Colony Club. Registration will only be accepted with Payment. Please mail registrations to:

Park Colony Club
P.O. Box 21
Allen Park, MI 48101



Allen Park Resident rate due to agreement with Allen Park Parks and Recreation Department

Contact: pccswimtennis@gmail.com

Parental Waiver and Consent Form

A Separate Waiver Must Be Completed for Each Child

As the parent or legal guardian of the child names below, I hereby give my full consent and approval for my child to participate in Tennis Lessons. I understand that there are certain risks of injury inherent in the practice and play of this sport. I am willing to assume these risks on behalf of my child. I hereby certify that my child is fully capable of participating in tennis and that my child is healthy and has no physical or mental disabilities that would restrict full participation in these activities. In addition to giving my full consent for my child's participation, I do hereby waive, release and hold harmless Park Colony Club, it's officers, coaches, sponsors, supervisors, and representatives for any injury that may be suffered by my child in the normal course of participation in swimming/ tennis and the activities incidental thereto, whether the result of negligence or any other cause.

Childs Name: _____ Age: _____

Address: _____

Phone Number: _____ Email: _____

Parent Signature: _____

Amount paid: _____ Received by: _____ Date: _____

Check #: _____ Cash: _____ Credit Card: _____

REGISTRATIONS WILL NOT BE ACCEPTED THE DAY CLASS BEGINS