

## Teddy Tennis Overview:

● \$255. per child

### Fridays:

● **Danny Bear Team:**

Ages 3 to 4

4:00–5:00 pm or 5:00–6:00pm

● **Charlie Bear Team:**

Ages 4 to 5

4:00–5:00 pm or 5:00–6:00pm

### Saturdays:

● **Danny Bear Team:**

Ages 3 to 4

9:00–10:00 am

● **Charlie Bear Team:**

Ages 4 to 5

9:00–10:00 am

# Teddy Tennis



Join us for **14 weeks** of fun, beginning December 9, 2011!

Teddy Tennis is a fantastic new teaching program that uses music and pictures to inspire children aged 3, 4 & 5 years to get active and to learn to play tennis... but the real secret of Teddy Tennis is that it is great FUN!

No play December 24–January 1

**COURTSIDE  
RACQUET CLUB**

2009 USTA NATIONAL FACILITY OF THE YEAR

**Kids Club**

Have questions? Call us at 908-713-1144 or visit our website: [www.courtsideracquet.com](http://www.courtsideracquet.com)

## Teddy Tennis Winter 2011–12 Registration

(Please fill out one form for each participant)

Participant Name: \_\_\_\_\_ Age: \_\_\_\_\_  Boy  Girl

Please check which class you would like your child to participate in:

**Fri.**  Danny Bear (4:00–5:00 pm)

**Fri.**  Danny Bear (5:00–6:00 pm)

**Sat.**  Danny Bear (9:00–10:00 am)

**Fri.**  Charlie Bear (4:00–5:00 pm)

**Fri.**  Charlie Bear (5:00–6:00 pm)

**Sat.**  Charlie Bear (9:00–10:00 am)

Parent/Guardian Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone: (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_

Amount Enclosed: \$ \_\_\_\_\_

Please indicate: Credit Card:

OR:  VIP Number: \_\_\_\_\_ Card No: \_\_\_\_\_ Exp. date \_\_\_\_\_

OR:  Check Enclosed, payable to: **Courtside Racquet Club** Signature: \_\_\_\_\_

Release Statement: I, the parent/guardian of the Participant, a minor, hereby agree that the Participant and I will abide by the rules of Courtside Racquet Club, LLC and we hereby release, discharge, and/or otherwise indemnify Courtside Racquet Club, LLC, its owners, officers, employees and instructors against any claim by or on behalf of the Participant or any third party arising out of Participant's involvement in any activities at Courtside Racquet Club. I certify that the Participant is healthy, in sound physical condition and otherwise competent to participate in activities at Courtside Racquet Club. In my absence, I hereby authorize and consent for the Participant to be transported for emergency medical care, if necessary, and for such emergency medical treatment as may be determined to be in Participants's best interest by the appropriate medical personnel. For good and valuable consideration we hereby consent to and authorize the reproduction, for publication use by Courtside for promotional materials, use of any photograph of my/our child. (If you have any questions please give us a call).

Date: \_\_\_\_\_ Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_