



High School Development Program

Sessions:

- 1) 8/22 - 8/26 2) 8/29 - 9/30 3) 10/3 - 10/28 4) 10/31 - 11/23** 5) 11/28 - 12/22**
- 6) 1/3 - 1/27** 7) 1/30 - 2/24 8) 2/27 - 3/31 9) 4/3 - 4/28 10) 5/1 - 5/26

Please circle session attending

** Holiday Week

HS Varsity & JV

Monday - Thursday

5:30 - 7:00 PM

Pricing

1 Day: \$25/Day

2 Days: \$24/Day

3-4 Days: \$23/Day

Please note: When signing up a student, you are buying a spot in the program and therefore you are charged at the beginning of each month, for the entire month (excluding holidays), whether you attend or not.

Name _____ D.O.B. ___ / ___ / ___ M ___ F ___

Email _____ Phone _____

Emergency Contact _____ Relationship _____

Clinic Name _____ Days Attending: M T W Th

Payment Enclosed: \$ _____ Receipt Number: _____

Credit Card #: _____ Exp. ___ / ___

I recognize the risk of injury in any exercise program and my child is participating upon the express agreement and understanding that I am hereby waiving and releasing the above clubs from any and all claims, costs, liabilities, and injuries while on the premises. The High School and Salt Lake Academy of Tennis Tennis Programs have my permission to use photos of my child in promotional and educational literature.

Parent/Guardian _____ Date: _____