



## Spring 2024

(6 weeks)

May 14, 2024, through June 22, 2024 (no class May 27<sup>th</sup>)

**Kids learn *faster* when they play more! Register for two clinics and SAVE \$\$\$!**

**Private Lesson Special for all juniors enrolled in spring semester-buy 5 lessons and get the 6<sup>th</sup> FREE**

Contact Mirka at [mrivas@westonracquet.com](mailto:mrivas@westonracquet.com) for more information.

### **Tennis Whizz** (Ages 3 – 4)

Monday 4:30-5:15

Tuesday, Thursday 3:00-3:45

Tuesday, Thursday 4:00-4:45

*Basic motor skills, movement, coordination, and fun.*

### **Red Ball** (Ages 5 – 8)

Monday 4:30-5:30

Tuesday -Friday 4:00-5:00

Tuesday, Thursday 3:00-4:00

Wednesday 5:00-6:00

*Basic strokes, rallying, and love for the game on 36 ft court.*

*\*Tennis Whizz clinics are 45 minutes in duration and start at designated times*

### **Orange Ball** (Ages 9 – 10)

Monday - Friday 4:00-5:00

Monday, Wednesday 5:00-6:00

Saturday 12:00-1:00

*Learn to serve, rally, play, and score on 60 ft court.*

### **Team Orange** (For advanced Orange Ball players)

Tuesday, Wednesday 4:30-6:00

### **Green Ball** (Ages 10 – 12)

Monday - Friday 4:00-5:00

Tuesday, Wednesday 6:00-7:00

Thursday 3:00-4:00 & 4:00-5:00

*Improving strokes & tactical play on a 78 ft court.*

### **Team Green** (For advanced Green Ball players)

Monday, Thursday 5:30-7:00

Wednesday 4:00-5:30

Saturday 1:30-3:00

### **All IGNiTE Players Enjoy:**

● **Complementary** Weekly Practice & Play Session

● **Complementary** Same Day Walk-on Court Use

### **Program Pricing**

Program	Cost 1/week	Cost 2/week
Sparks	\$290	\$540
Red/Orange/Green	\$390	\$725
Green Advanced	\$585	\$1090

- Monday classes pro-rated for 4 weeks
- Sibling Discount of 5% off the lower tuition

### **Weekly Practice & Play Schedule**

Tentative Schedule

Clinic	Day	Time
Red Ball	Friday	5:00-6:00pm
Orange Ball	Friday	5:00-6:00pm
Green Ball	Friday	5:00-6:00pm Or 6:00-7:00pm

***Weston Racquet Club – Great Tennis, Great Teaching!***

405 Newtown Turnpike, Weston, CT 06883 | 203-226-3349 | [www.westonracquet.com](http://www.westonracquet.com)



**Adult and Junior Program Registration Form**

Name \_\_\_\_\_ Birthdate (juniors only) \_\_\_\_\_ E-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

***PAYMENT IS DUE AT TIME OF REGISTRATION – PLEASE SEE THE FRONT DESK***

**Select Program**

**Membership:** Junior < 18 \_\_\_\_\_ Adult \_\_\_\_\_ Senior >65 \_\_\_\_\_ Couple \_\_\_\_\_ Family \_\_\_\_\_

**League Play:** Women’s \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_

**Women’s / Men’s Team Program:** Day \_\_\_\_\_ Time \_\_\_\_\_

**Seasonal Lesson:** Day \_\_\_\_\_ Time \_\_\_\_\_ **Clinic Lesson:** Day \_\_\_\_\_ Time \_\_\_\_\_

**Junior Program:** Sparks \_\_\_\_\_ Red \_\_\_\_\_ Orange \_\_\_\_\_ Green \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_

Orange Advanced \_\_\_\_\_ Green Advanced \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_

**USTA Match** \_\_\_\_\_ **Adult** \_\_\_\_\_ **Junior** \_\_\_\_\_ **Party** \_\_\_\_\_ **Cardio/ Point** \_\_\_\_\_ **Evaluation** \_\_\_\_\_

**USTA Summer** \_\_\_\_\_ **Team** \_\_\_\_\_ **Day** \_\_\_\_\_ **Level** \_\_\_\_\_

**WAIVER**

*I, as the participant and or as the legal guardian of the participant, understand and am aware that any strenuous physical activity involves certain risks; I hereby assume the risk of any and all accidents and injuries of any kind which may be sustained by me or my child by reason or in connection with my or his/her participation in any club program or activity; and I hereby release and discharge Weston Racquet Club, Grand Slam Health & Tennis Clubs, Inc., Spectrum Sports, its partners and their shareholders, directors, officers, agents and employees from any and all actions, causes of action, damages, claims or demands which may arise against Weston Racquet Club, Grand Slam Health & Tennis Clubs, Inc., Spectrum Sports and other described parties, for all injuries known or unknown which I, or my children have or may incur by participating in these programs, except to the extent such accident or injury is caused by or results from negligence or willful misconduct of Weston Racquet Club, Grand Slam Health & Tennis Clubs, Inc., Spectrum Sports and other described parties. Waiver: I, the undersigned have read this release and understand all of its terms. I execute it voluntarily and with full knowledge of its significance.*

**Signature:** \_\_\_\_\_ **Relationship (if signing for minor)** \_\_\_\_\_ **Date:** \_\_\_\_\_

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