

ADULT PROGRAMS

2023-24 INDOOR SEASON

34-WEEK SEASON

Tuesday, September 5, 2023 through Monday May 13, 2024

(Excludes Thanksgiving on 11/23 and the holiday week, 12/24/23 through 1/1/24)

USTA Women's Team Practices

Join your teammates to work on match strategy, develop synergies with doubles partners, and have fun! Each session includes a dynamic warm-up, live ball instruction, and coached match play.

Day/Level	<u># Weeks</u>	<u>Schedule*</u>	<u>Time</u>	<u>Cost</u>
Sunday (2.5)	29	9/10/23 – 5/12/24	1:00 - 3:00pm	\$ 2,320.00
Tuesday (3.0)	34	9/05/23 – 4/30/24	1:00 – 3:00pm	\$ 2,720.00
Thursday (3.0)	34	9/07/23 – 5/09/24	12:30 - 2:30pm	\$ 2,720.00

*Excludes Thanksgiving on 11/23 and the holiday week, 12/24/23 – 1/01/24

Player ratio is 4:1; annual membership required to participate in all WRC programs. If a question of level exists for placement, an evaluation may be arranged.

Additional Program Information

- New balls provided for all home matches
- o Projected five or six home matches with fee of \$40 each
- o Home matches for the 3.0 teams will be held on Wednesdays, 12:00-2:00pm
- o Home matches for the 2.5 team will be held on Sundays, 1:00-3:00pm
- o Pro will evaluate team play at three USTA home matches

Registration - To secure your tennis reservation, please choose from one of the following:

- 1. Early Registration: 10% Discount if paid in full by 2/28/2023
- 2. Deposit: \$500 Deposit payment, remainder due by 8/15/23

Note: Payments, including a deposit-equivalent, are refundable until 6/1/23. After 6/1/23, deposits or deposit-equivalents are forfeited and non-transferable to other programs.

Weston Racquet Club – Great Tennis, Great Teaching!

405 Newtown Turnpike, Weston, CT 06883 | www.westonracquet.com | 203.226.3349





2023-24 INDOOR SEASON

Adult and Junior Program Registration Form							
Name	Birthdate (juniors only) E-mail						
Mailing Address							
City	State	Zip					
Phone (H)	(W)	(Ce	ell)				
PAYMENT	T IS DUE AT TIME OF REC	SISTRATION – PLI	EASE SEE THE FRO	ONT DESK			
	Sel	ect Program					
<mark>Membership</mark> : J	Junior < 18 <mark>Adult _</mark>	Senior >65	Couple Fa	amily			
League Play:	Women's Day _		_ Time				
<mark>Women's / Men</mark>	<mark>'s Team Program</mark> : Da	ay	_ Time				
Seasonal Lessor	n : Day Time	Clinic Lesson	i: Day Time	9			
USTA Match	_ Adult Junior	_ Party	Cardio/ Point	Evaluation			
USTA Summer	Team	Day	Le	vel			

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: