



2024 SPRING SESSION
May 14 – June 22* (6 Weeks)

**No class May 27th. Monday tuition is pro-rated.*

Juniors improve faster when they play more! Register for two clinics and SAVE \$\$\$!
 For more information contact Mirka at mrivas@westonracquet.com

Weston’s Hitting Hot Yellow Ball Pathway

Development Level → **Competitive Level** → **EXCEL Level**
 Learn the FUNDamentals → Learn to Compete → Be the Best

Development (ages 12+)

Game-based approach to getting started or getting back into tennis with a focus on the fundamentals.

Monday	3:00-4:00
Monday -Thursday	4:00-5:00
Wednesday	6:00-7:00
Thursday	6:30-7:30
Friday	5:00-6:00
One Clinic/week	Two Clinics/week
\$390	\$725

Complementary Match Play- Fridays from 6:00-7:00

Competitive (ages 12+)

Technical & tactical refinements, situational practice.

Monday, Tuesday, Thursday	5:00-6:30
Wednesday	5:30-7:00
One Clinic/week	Two Clinics/week
\$585	\$1,090

Complementary Match Play- Sundays from 3:00-5:00

EXCEL (ages 12+)

The EXCEL program is the top of WRC’s Junior Tennis Pathway and is designed for dedicated juniors ages 12+ who are looking to take their game to the next level.

Tuesday, Thursday	5:00-7:00
One Clinic/week	Two Clinic/week
\$ 780	\$1454
<i>Complementary Match Play- Sundays from 3:00-5:00</i>	

All Fire Participants Enjoy:

- *Sibling Discount 5% off the lower tuition*
- **Complementary** Weekly Match Play Session
- **Complementary** Same Day Walk-on Court Use



Weston Racquet Club – Great Tennis, Great Teaching!

405 Newtown Turnpike, Weston, CT 06883 | 203-226-3349 | www.westonracquet.com



Participant's Name: _____ DOB: _____

School: _____ Grade: _____ Email: _____

Address: _____ City _____ State _____ Zip _____

Phone (H) _____ (W) _____ (C) _____

Circle Program - Indicate Day/Time Requested

Development: Day(s) _____ Time _____ **Competitive:** Day(s) _____ Time _____

Excel: Day(s) _____ Time _____

Tuition Payment

Check: _____ Cash: _____ Credit Card: _____ Amex _____ Visa _____ MasterCard _____

Card #: _____ Name on Card: _____

Amount: _____ Expiration Date: _____ CVV: _____ Cardholder Signature: _____

Payment / Refund Policies

PAYMENT IS DUE AT TIME OF REGISTRATION

Refund/ Credit - If a player discontinues participation after the season/session begins; an in-house credit will be provided for the remainder of classes less any cancellation fees. This credit may be applied toward any family future purchases at Weston racquet Club. Refunds will be issued only if the player moves more than 50 miles from their current residency or an injury prevents the player from participating for the remainder of the season. Documentation will be required prior to refund consideration. All refunds/credits after three weeks of a players' start date will be subject to a \$150 cancellation fee.

Make-ups – Weston Racquet Club does not guarantee make-up sessions or provide credit for sessions missed. Players may make up two missed sessions per class purchased. All junior make-up sessions must be approved, scheduled through our Tennis Program Director, and completed prior to the end of the season in which they occur.

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:** _____