



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)

Level Based Clinics

Each session consists of a warmup, level-based drills, live ball instruction, and friendly competitive coached match play. Join the fun and meet new players in this dynamic clinic!

<u>Day</u>	<u>Program</u>	<u>Level</u>	<u>Time</u>	<u>Schedule*</u>	<u>Cost</u>
Monday	Men	2.5/3.0	7:30-9:30pm	9/11/23 – 5/13/24	\$3,060
Tuesday	Men	3.5/4.0	7:30-9:30pm	9/5/23 – 4/30/24	\$3,060
Wednesday	Men	4.0	7:00-9:00pm	9/6/23 – 5/1/24	\$3,060
Thursday	Men	4.0/4.5	7:30-9:30pm	9/7/23 – 5/9/24	\$3,060
Thursday	-----	Beginner	10:30am-12:00pm	9/7/23 – 5/9/24	\$2,295

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

Program Details

- 4:1 player-to-pro ratio
- Annual membership required to participate in all WRC programs
- If a question of level exists for placement, an evaluation may be arranged

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





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2023-24 INDOOR SEASON

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 ___

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:** _____