



Junior Tennis Registration Form

We do not issue refunds

Player Name		
Date of Birth	___ / ___ / ____	Age
Grade		
School		

Tennis Experience: **Skill Level:** ☐ Beginner ☐ Advanced Beginner ☐ Intermediate ☐ Advanced

Has the participant taken tennis lessons before? ☐ Yes ☐ No

If yes, please describe prior experience: _____

Program Information: All participants 12 years and older are required to have a membership to the club.

Program Name	Glenbrook Racquet Club Junior Tennis Program		
Session Dates	Session 1: August 24–October 25	(9 weeks)	(No class 9/7)
	Session 2: October 26–January 10	(11 weeks)	(No class 11/26, 12/24, 12/25, 12/31, 1/1)
	Session 3: January 11–April 4	(11 weeks)	(No class 3/22 – 3/28)
	Session 4: April 5–June 6	(9 weeks)	(No class 5/25)
Make – Up Policy	Two make-ups are allowed per session and must be completed within the missed session. Email make-up request to makeup@glenbrookrc.com		

Class Times

Red Ball	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
		4:00 – 5:00	5:00 – 6:00	4:00 – 5:00		9:00 – 10:00	9:00 – 10:00 10:00 – 11:00

Orange Ball	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
		4:00 – 5:00	5:00 – 6:00	4:00 – 5:00	4:00 – 5:00	9:00 – 10:00	12:00 – 1:00
Adv Orange	4:00 -5:30				4:00 -5:30		

Green Ball	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1 hour class	4:30 – 5:30	4:00 – 5:00	5:00 – 6:00	4:00 – 5:00	4:00 – 5:00		
1.5 hour class	4:00 – 5:30	5:30 – 7:00	4:00 – 5:30	5:30 – 7:00	4:30 – 6:00	11:00 – 12:30	

Yellow Ball	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1 hour class	7:00 – 8:00	4:00 – 5:00 6:00 – 7:00	4:00 – 5:00	4:00 – 5:00 7:00 – 8:00	4:00 – 5:00		1:00 – 2:00
1.5 hour class	5:30 – 7:00	4:00 – 5:30	5:30 – 7:00	4:00 – 5:30	4:30 – 6:00	12:30 – 2:00	11:30 – 1:00
2 hour class	4:00 – 6:00	5:00 – 7:00	4:00 – 6:00	5:00 -7:00		11:00 – 1:00	

Tournament Training	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	6:00 – 8:00	7:00 – 9:00	6:00 – 8:00	7:00 – 9:00			

Parent/Guardian Information

Parent/Guardian Name
Phone Number
Email Address
Home Address

Medical and Emergency Information

Allergies or Medical Conditions
Medications
Emergency Contact Name
Emergency Contact Phone
Relationship to Participant

Consent and Waiver

I give permission for my child to participate in the Glenbrook Racquet Club Junior Tennis Program. I understand that tennis and related activities involve some risk of injury. I confirm that the participant is physically able to take part in the program and agree to notify Glenbrook Racquet Club staff of any medical concerns or limitations.

Photo/Media Permission ☐ Yes, I grant permission for photos or videos to be used for program purposes.

☐ No, I do not grant permission.

Payment Information

1 hour class: \$333 (9 weeks) \$407 (11weeks)

Membership Fee: \$199.00 per year

1.5 hour class: \$513 (9 weeks) \$627 (11 weeks)

2 hour class: \$702 (9 weeks) \$858 (11 weeks)

Registration Fee: Session 1 \$ _____ Session 2 \$ _____ Session 3 \$ _____ Session 4 \$ _____

Payment Method: ☐ Check ☐ Card ☐ Online (Accept Visa, MC, Discover)

Name on Card: _____ Exp Date: _____

Number: _____ Security #: _____

Signature

Parent/Guardian Signature _____ **Date:** ____ / ____ / ____

Photo Waiver Consent Form

I understand that Glenbrook Racquet Club (GRC) may take photographs and / or videos of class or club participation and club activities. I agree that GRC shall be the owner of these photographs and may use these photographs and/or videos in relation to the promotion of the club on the club website, Instagram, or it's Facebook Page. I give GRC permission to use these photographs / videos for promotional purposes and therefore, relinquish all rights that I may claim in relation to the club's use of said photographs or videos.

Signature of Parent / Guardian _____ Date

Print Name
