



JOSEPH T. ST. LAWRENCE COMMUNITY, HEALTH & SPORTS CENTER
115 Torne Valley Road, Hillburn, NY 10931
(845)753-2324



TENNIS PROGRAM REGISTRATION FORM

PRIVATE LESSON/GROUP TENNIS LESSON SERIES

Private:	_____	1x
Group Lesson:	_____	2x
	_____	3x
	_____	4x

FEES:

Private	1x: \$745
Group Lessons	2x: \$380
	3x: \$260
	4x: \$200

LEVEL OF INSTRUCTION* (circle one) **BEGINNER** **ADV. BEGINNER** **INTERMEDIATE**

Participant's Name: _____

Gender: (circle one) **M** **F** **DOB:** _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Phone: _____

Email: _____

PAYMENT IN FULL MUST be received at time of registration. TOTAL FEES: _____

**Check here to request evaluation of your child for appropriate level of instruction and you will be contacted by the Tennis Staff to make arrangements.*

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***If we cannot find a suitable group for your child, we will refund your payment in full.*

The Town of Ramapo does not offer accident insurance, and I understand that my personal insurance bear's primary responsibility in case of accident or injury. I authorize the use of photos for promotional purposes. All refunds must be requested in writing and may incur a \$15 surcharge.

Parent/Guardian Signature: _____ Date: _____