

YORKVILLE YOUTH ATHLETIC ASSOCIATION

Beginner Tennis Program

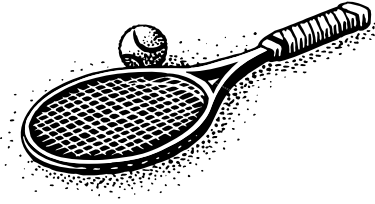
Fall Session

Saturday Sept 11, 2010 – Saturday November 20, 2010

(skipping September 18)

AT

Sutton East Tennis Center



York Avenue at 59 Street

Fee: \$200.00

Beginner Tennis – Limited Space available

Two Programs Available

Beginner Tennis Players in grades 2, 3, 4

Advanced Beginner Players in grades 5/6/7/8

___Time of Program – Saturdays from 7:00 P.M. – 8:00 P.M. grades 2/3/4

___Time of Program – Saturdays from 8:00 P.M. – 9:00 P.M. grades 5/6/7/8

The Sutton East Tennis Club will provide the instruction, courts, tennis balls and fun. You provide the player, tennis shoes and racquet.

This is Yorkville's third season doing Tennis. Hope you will join the fun.

Please include self-addressed, stamped envelope, check and application.

Name _____ Grade as of Sept. 2010 _____ School _____

Address _____ Apt. _____ Zip Code _____

Home Phone _____ Work Phone _____

E-mail Address (print clearly) _____

Parent's Names _____

Parent Signature _____

Mail to: Yorkville Youth, C/O Arlene Virga, P. O. Box 1556 NY NY 10028

Questions call Arlene Virga 212 360-0022.

Please note: no refunds, transfers or credits at any time.

Must Sign Release Statement – see other paper

Our New Insurance Company requires all parents or guardians to sign this release form for each child.

Yorkville Youth Athletic Association
Release Statement
2010-2011

Release Statement: I, the parent/guardian of _____, do hereby give my approval for him/her to participate in any and all activities of the Yorkville Youth Athletic Association and agree to abide by all rules and regulations of the institution. I assume all risks and hazards incidental to such participation in these activities, and I do hereby waive, release, absolve, indemnify, and agree to hold harmless the Yorkville Youth Athletic Association and it's staff, the Board of Directors of The Yorkville Youth Athletic Association, officers and directors, the organizers, sponsors, supervisors, participants and all persons transporting my child/dependent to and from activities, from any claims arising out of an injury to my child/dependent, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance.

I also understand that the Yorkville Youth Athletic Association has a no refund, no credit policy for any reason at any time for any program.

Signature of Parent/Guardian _____ Date _____