

Magic Lincer Tennis Academy&Club Summer Tennis Programs

June 20th-August 26th

9:00-12:00 Drills, Strategy and Fitness

12:00-1:00 Lunch

1:00-4:00 Mental Training and Match Play

Full Day \$560/week
Half Day \$390/week
Individual full day \$140
Individual half day \$95

Before and Aftercare available at \$10/hour.

Magic Lincer Tennis Academy/Club Summer Program Registration

Player Name:		Bir	th Date:	Facility:	
Address:					
Parent/Guardian Name:		Phone:			
Secondary Phone:			Email:		
Medical Concern	s/Allergies:				
Please circle y	our weeks of cho	ice and h	alf or full day:		
Week 1: J	une 20 - June 24	H/F	Week 6: July	/ 25 - July 29	H/F
Week 2: J	une 27 - July 1	H/F	Week 7: Aug	1-Aug 5	H/F
	uly 5 - July 8	H/F	Week 8: Aug	8 - Aug 12	H/F
•	= \$450, H = \$315) uly 11 - July 15	H/F	Week 9: Aug	15 - Aug 19	H/F
Week 5: J	uly 18 - July 22	H/F	Week 10: Au	ıg 22 - Aug 26	H/F
Tennis Club of Manch discharge the said ML actions, causes of action and variants thereof, of done or left undone by MLTC/MLTA or any child to be taken on trests. If at any time, demergency situation we parents. This also allowhereof we have here Pierson Lane, Windso	e benefits expected to be debester (MLTC) and/or the TC/MLTA, its servants are on, claims and demands we of our child or children or we MLTC/MLTA or any of thing arranged by it to take ips relating to tennis tourn the tocircumstances of anothere parents cannot be resons MLTC/MLTA to use unto set our hands and set or CT this day of	Magic Lincer and agents, menthosoever in an loss of or dam the other per the place outside aments. We haccident or su ached. It is unany pictures of als at the loca	r Tennis Academy (Ambers and participating way arising out of page to property occursons hereby released to fits training premareby give consent fudden illness and menderstood that every four children for distions of 404 West Central Constant of 40	ILTA), we hereby releging parents of and from injury or illness, incluring during or as a major in connection with the inises. We hereby give for our child to take particular treatment in the effort will be made to applay on boards and we	ease and forever om any and all uding COVID-19 result of anything he operation of a consent for our art in physical case of an contact the vebsite. In witness
Payment Type:	Paymer	nt Amount:		Date:	