

# INDOOR PRIVATE LESSONS 2010



## SPRING CYCLE

### Lesson Rates (3 weeks)

Private (\$210/3 hrs)

Semi Private (\$240/3 hrs)

Name \_\_\_\_\_ Age (Jrs Only) \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_

Parent cell phone \_\_\_\_\_

E-mail \_\_\_\_\_

Amount Included (\$210) \_\_\_\_\_ Saturdays 12-1 pm \_\_\_\_\_

### Cycle Selection:

\_\_\_\_\_ Cycle I (March 6<sup>th</sup>-20<sup>th</sup>) (Saturdays 11am- 1pm)

\_\_\_\_\_ Cycle II (March 27<sup>th</sup>-April 10<sup>th</sup>)

\_\_\_\_\_ Cycle III (April 24<sup>th</sup>-May 8<sup>th</sup>)

\_\_\_\_\_ Cycle IV (May 15<sup>th</sup>-May 29<sup>th</sup>)

Please forward registration forms to:

NETRESULTS, LLC P.O. Box 81313 Wellesley Hills, MA 02481

Brookline Tennis Hotline 781-239-9975

Check us out @ [www.netresultstennis.net](http://www.netresultstennis.net)

*I agree that the instructional program runs for 3 weeks and that NETRESULTS can not guarantee make ups for missed classes unless cancelled due to inclement weather. I hereby waive, release, absolve, indemnify and agree to hold harmless NETRESULTS, their directors, instructors, staff and volunteers from any claim arising out of injury to my child or myself. I also consent to allow medical treatment in case of emergency.*

Signature (required) \_\_\_\_\_ Date \_\_\_\_\_