



2017 Summer Class Sign Up Sheet

Student's Name: _____ Age: _____ Membership #: _____

Parent's Name: _____ Phone #: _____

Please check the program your student will be attending:
***ALL CLASSES (Except 8 & Under) HELD AT TUNNEL SPRINGS PARK**

- | | |
|--|------------------|
| <input type="checkbox"/> Academy: | Week Camp |
| _____ Monday-Thursday from 7:30am-9:00am | \$84 |
| <input type="checkbox"/> Pre-Academy: | Week Camp |
| _____ Monday-Thursday from 10:30am-12:00pm | \$84 |
| <input type="checkbox"/> USTA 10 and Under: | Week Camp |
| _____ Monday-Thursday from 9:00am-10:30am | \$84 |
| <input type="checkbox"/> USTA 8 and Under: <u>*Class Held at Eagleridge</u> | Week Camp |
| _____ Tuesday & Thursday from 9am-10am | \$28 |

Please check each week your student will be attending camp:

- | | |
|---|--|
| <input type="checkbox"/> Week 1: June 5 – June 8 | <input type="checkbox"/> Week 7: July 17 – July 20 |
| <input type="checkbox"/> Week 2: June 12 – June 15 | <input type="checkbox"/> Week 8: July 25 – July 27* |
| <input type="checkbox"/> Week 3: June 19 – June 22 | <input type="checkbox"/> <small>*No Class on July 24th, Week will be prorated</small> |
| <input type="checkbox"/> Week 4: June 26 – June 29 | <input type="checkbox"/> Week 9: July 31 – August 3 |
| <input type="checkbox"/> Week 5: July 3 – July 6* | <input type="checkbox"/> Week 10: August 7 – August 10 |
| <input type="checkbox"/> <small>*No Class on July 4th, Week will be prorated</small> | <input type="checkbox"/> Week 11: August 14 – August 17 |
| <input type="checkbox"/> Week 6: July 10 – July 13 | |

***MAX of 12 Spots Per Week!!!**

- Participants **MUST** turn in this Sign Up Sheet to reserve their spot.
- No prorating for days missed unless specified holiday. Participants will be billed for the entire week

Members can pay up front or have our Staff bill to your account.

Non-Members must pre-pay to reserve your spot. Non-members are billed \$10 extra per weekly camp.

Participants must give a minimum of 2 weeks notice to cancel or change weeks. Participants will be billed otherwise.

Parent/Guardian Signature: _____ Date: _____