



# ADULT TENNIS PROGRAMS 2017

Pay as you go (tennis) clinic rates: \$20 for 1 hour clinics / \$25 for 1.5 hour clinics.



## **“HACKERS” CLINIC**

See your game skyrocket with the theme of the week. Class combines progressive instruction through drills and point into one awesome tennis workout!

**\$75 for 4 (1.5 hour) classes**

**Tuesday 9:30 AM – 11:00 AM**

**Friday 9:30 AM – 11:00 AM**

Burn lots of calories while participating in many fast paced tennis & aerobic drills set to music!

***\$90 for 4 (1.5 hour) classes  
(Flexible attendance policy)***

**Monday 6:30 PM – 8:00 PM**

**Wednesday 6:30 PM – 8:00 PM**

**Saturday 9:00 AM – 10:30 AM**

**(ALL LEVELS)**

## **SPONSOR JUNIOR TENNIS BY BECOMING A**

### **“FRIEND OF THE FACILITY”**

#### **\$100 PER MONTH**

**Benefits include:**

**1 free clinic per week**

**Free court fees**

**Free match play**

**Pro-Shop discounts**

**Discounts on adult mixers and round robins**

**MIXERS, IN-HOUSE LEAGUES & ROUND ROBINS COMING SOON!**

**(Some restrictions)**

## **LUDA’S DOUBLES STRATEGY**

***\$120 for 6 (1.5 hour) classes  
(Flexible attendance policy.)***

**Wednesday**

**9:30 AM — 11:00 AM**

**Begins September 7!**

## **“NEWBIE” CLINIC**

***\$120 for 8 (1.0 hour) classes  
(Flexible attendance policy.)***

**(NTRP 1.5 > 3.0)**

**Friday 9:00—10:00 am**

**Call the Front Desk for more info! (619) 221-9000**

PARTICIPANT NAME: \_\_\_\_\_

DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

VISA OR MASTERCARD # \_\_\_\_\_ EXP DATE \_\_\_\_\_ 3-DIGIT CODE \_\_\_\_\_

HOW DID YOU HEAR ABOUT US? \_\_\_\_\_

REFUND POLICY: THERE WILL BE NO REFUNDS ONCE THE SESSION HAS STARTED.

**LIABILITY RELEASE:** Participant Initial \_\_\_\_\_

Barnes Tennis Center, owned and operated by Youth Tennis San Diego, a California non-profit corporation (herein collectively referred to as "BTC", provides program(s) ("Activities") including but not limited to tennis, fitness, yoga and other strengthening exercises, etc.

IN CONSIDERATION of being permitted to participate in any way in any "Activity": I, for myself, as Parent/Guardian of Participant, and/or as Participant, including my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) any/all athletic activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis, and/or death ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the "releasees" named below; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I fully accept and assume all such Risks and all responsibility for losses, costs, and damages I incur as a result of my participation or that of the Participant's participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE BTC as well as the officers, directors, agents, employees and assigns of each, and the BTC coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, and any other party indemnified and held harmless by BTC, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Release's, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

**MEDICAL RELEASE:** Participant Initial \_\_\_\_\_

I, grant to BTC to act as guardians/spokesmen in granting permission for emergency treatment/hospitalization (including anesthesia) if necessary for the Participant, en route to or from or at the site of any "Activity" or hospital or other medical facility. I understand that should a health emergency arise, I will be attempted to be notified, but that if I cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel is authorized. I further understand that I will be responsible for payment of any such medical procedures.

**PHOTO/VIDEO RELEASE:** Participant Initial \_\_\_\_\_

I hereby authorize BTC to allow the reproduction, dissemination, and/or publication of my name and likeness for media coverage, public relations, or any other purpose which may involve the use of photographs, films, and/or video tape recording. This is to be done in conjunction with my participation in an "Activity" or event and I understand and agree that I may neither pay a fee to receive individual promotional consideration from my participation, nor will I receive any payment for the possible commercial use of my name or likeness.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

\_\_\_\_\_  
PRINTED NAME OF PARTICIPANT

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE