

FIG GARDEN SWIM AND RACQUET CLUB

MINI FIGS SUMMER/FALL SCHEDULE

For more information, contact Cynthia at (805) 367-6426

MONDAY CLASSES START SEPTEMBER 12TH

(7 week session / September 12th - October 24th)

| MINI FIGS I | (ages 4-5) | Monday 4:00-4:45pm |
|--------------------|------------|--------------------|
| MINI FIGS II | (ages 5-7) | Monday 4:45-5:30pm |
| Member Pricing | \$133 | Drop-In \$24.00 |
| Non-Member Pricing | \$158 | Drop-In \$29.00 |

THURSDAY CLASSES START SEPTEMBER 8TH

(8 week session / September 8th - October 27th)

| MINI FIGS I | (ages 4-5) | Thursday 4:00-4:45pm |
|--------------------|------------|----------------------|
| MINI FIGS II | (ages 5-7) | Thursday 4:45-5:30pm |
| Member Pricing | \$152 | Drop-In \$24.00 |
| Non-Member Pricing | \$177 | Drop-In \$29.00 |









Coach Cynthia

Coach Cynthia is an elite USPTA certified Tennis pro with many years of coaching experience. She is a former world ranked WTA #15. Cynthia played in over 25 Grand Slam Events, including Wimbledon, The Australian Open, The French Open, and the US Open!

| MINI FIG REGISTRATION FORM | | | | | | | | |
|--|--|--|--|--|---|--|--|--|
| St | udent's Name: | | Age: | Gender: M / F | | | | |
| | | Member Num | | | | | | |
| Pä | arent's Name: | | | | | | | |
| A | ddress: | City: | | Zip Code: | | | | |
| Pł | none Number: | Email: | | | | | | |
| | mergency Contact Name: | | | | | | | |
| М | ember Selections (Please circle) | Non-Member Selections (Please circle) | | | | | | |
| М | onday Session | Monday Session | | | | | | |
| Tł | nursday Session | Thurs | day Sessio | n | | | | |
| | | | | | | | | |
| CONDITIONS OF REGISTRATION | | | | | | | | |
| l, th Clul exe | e signing parent or legal guardian, hereby apply to reg o's Junior Tennis Academy. By doing so, I acknowledge cute this document. | | | ars on the reverse, in Fig Gai ing conditions of registration | rdenSwim & Racquet n and am authorized to | | | |
| | | GENERAL MAT | ΓERS | | | | | |
| 1) | I agree that the child and his/her parents or legal gua JTA for the health, safety and welfare of the child. | ardians will abide by t | ne rules and r | regulations set by Fig Garde | n Swim & Racquet Club's | | | |
| 2) | I understand that Fig Garden Swim & Racquet Club's mental to the grogram and/or to other children. I agr | JTA reserves the right ee that there will be r | to dismiss a no refund in t | child whose conduct is dan he event of dismissal. | gerous, illegal or detri- | | | |
| 3) | I understand that Fig Garden Swim & Racquet Club's its JTA flyer as necessary. | JTA reserves the right | to cancel, ch | ange or substitute program | ns or activities as listed in | | | |
| 4) | 4) I consent to the use of any pictures of the child in connection with Fig Garden Swim & Racquet Club's JTA future advertising or promotion. | | | | | | | |
| 5) I certify that the child can participate safely in such activities and that the child suffers from no physical or medical condition which would make his/her participation unsafe or unusually dangerous to himself/other children. | | | | | | | | |
| 6) | 6) Parents are required to pick up their children promptly at the end of the program. If the child will be going home with someone other that you or your spouse, our staff must be notified. Children who are not picked-up at the conclusion of the program will incur an additional charge. | | | | | | | |
| | PAYI | MENT & CANCELLA | TION POLIC | Y | | | | |
| to a spa or i to a | payment must be submitted with every child's registrattend in Fig Garden Swim & Racquet Club's JTA due to ce availability. We make exception for a child who suffiness is of a nature that the child cannot safely participed cotor certified injury or illness will receive a pro-rate is not accepted as a basis for refund. | an emergency or illne ers a physical injury o pate in another week | ess, he/she wi r illness and v of the progra | II be able to make it up in an whose doctor certifies to us Im. A child who withdraws fr | nother week based on ,in writing, that the injury romthe program early du | | | |
| RELEASE OF LIABILITY | | | | | | | | |
| rele ties par | derstand and acknowledge that certain activities (whe lase, and agree to indemnify and hold harmless Fig Ga , costs and expenses (including attorney fees) which a ticipation in any and all program's activities. It is furthe egal guardian. | ırden Swim & Racque child may sustain or i | : Club and its ncur in any w | staff from any and all losse: yay arising out of or in conn | s, claims, damages, liabili- ections with the child's | | | |
| | | MEDICAL | | | | | | |
| exp | ne event of a medical emergency, I hereby give permis ense, proper treatment as necessary for the child nan de should an emergency arise. | sion to Fig Garden Sv ned on the reverse sid | vim & Racque de. I understa | et Club and/or medical perso and that all reasonable effor | onnel to æcure, at my ts to œntact me will be | | | |
| I ha Swii | ve read, understand and agree to all sections of the Cond m & Racquet Club's JTA have been answered to my satisfac | litions of Registration. A ction. | ll questions a | bout the policies, activities and | d operations of Fig Garden | | | |
| Prii | nt Name: | Signature: _ | | | | | | |
| | | <u> </u> | | | | | | |

Date: ___