## 2024 YOUTH TENNIS PROGRAMS

These programs are offered in conjunction with the USTA

Registration begins: February 12, 2024 Registration deadline session 1: June 14, 2024 Registration deadline session 2: July 19, 2024

### **QUICK START (5-7 Year Olds)**

Lessons focus on proper fundamentals, exercise and fun. Classes meet twice weekly for 4 weeks. Classes are 50 minutes.

Site: Byrnes Tennis Center

Rate: \$40 Member Rate: \$36

	Days	Time & Program #	Begins
Quick Start Session 1	Mon & Wed	9:30 am - 105	June 10
	Mon & Wed	10:30 am - 106	June 10
	Tues & Thurs	9:30 am - 107	June 11
	Tues & Thurs	10:30 am - 108	June 11
	Days	Time & Program #	Begins
	Mon & Wed	<b>Time &amp; Program #</b> 9:30 am - 109	Begins July 15
Quick Start	Mon & Wed		U
Quick Start Session 2	Mon & Wed	9:30 am - 109	July 15
	Mon & Wed Mon & Wed	9:30 am - 109 10:30 am - 110	July 15 July 15



### NATIONAL JUNIOR TENNIS LEAGUE (New Players 8 & Older)

Sponsored by the Metropolitan Tennis Association. Classes meet twice weekly for 6 weeks. Classes are 50 minute lessons plus Friday Fun Days.

Site: Byrnes Tennis Center

Rate: \$60 Member Rate: \$54

	Days	Time	Begins	
	Mon & Wed	9:30 am - 113	June 10	
NJTL	Mon & Wed	10:30 am - 114	June 10	
Session 1	Tues & Thurs	9:30 am - 115	June 12	
	Tues & Thurs	10:30 am - 116	June 12	
	Tues & Thurs	6:00 pm - 117	June 12	



# CEDAR VALLEY SPORTSPLEX

300 Jefferson Street Waterloo, IA 50701 319.291.0165 www.CVSportsPlex.org



### JUNIOR TEAM TENNIS (Able to play regulation matches)

Twice weekly 1-hour lessons plus matches against other teams on Fridays. Lessons are 6 weeks per session

Site: Byrnes Tennis Center

Rate: \$65 Member Rate: \$58

Jr. Team	Days	Time & Program #	Begins
Session 1	Mon & Wed	11:30 am - 118	June 10
36221011 1	Tues & Thurs	11:30 am - 119	June 12

#### **TOURNAMENT GROUP**

Instruction and match play 2 hours daily, 3 days a week for 7 weeks. May play in both Junior Team and Tournament Group. Mondays, Tuesdays and Wednesdays from 12:30-2:30 PM beginning June 10th.

Site: Byrnes Tennis Center

**Rate**: \$65

Member Rate: \$58 Program #: 120





Print Name of Parent, Guardian or Participant (Under 18)

Register online, email or return form to: 300 Jefferson St. Waterloo, IA 50701 319-291-0165 <u>www.cvsportsplex.org</u> leisure.services@waterloo-ia.org

Parent's/Guardian's Name		Email			
Address			City Zip		
Phone: Home		Cell		Work	
CVSP is committed to inclusion. Does your child requ	ire any modifications	to help hin	n/her be successful?		
Participant's Name (Last, First)	M/F Birth Date	Current Grade	Program #	Program Name	Fee
	1 1	+ +			
	1 1	1 1			
				TOTAL \$	
Method of Payment ☐ Cash ☐ Check				*FOR OFFICE USE (	ONLY
☐ Visa ☐ Mastercard Card Number				—Amount:	
Discover  Exp. Date (Mo	onth/Veor)		CVV	Date Received: Staff Intials:	
Exp. Date (ivid	onthi i ear)		CVV	Staff Indials:	
continually strive to reduce risks and insists that all participant Warning of Risk Recreation activities are intended to challenge and engage the tion, medical advice, conditioning and equipment, there is still ards and dangers can be foreseen. Depending on the particular ping, falling, poor skill level or conditioning, carelessness, hor sion, instruction or officiating, and all other circumstances inh impossible for Waterloo Leisure Services and the Cedar Vallet WAVIER AND RELEASE OF ALL CLAIMS AND ASSU Please read this form carefully and be aware that in signing up waiving and releasing any and all claims for injuries, damages program (including transportation services/vehicle operation, as a participant in the program, I recognize and acknowledge including death, damages or loss regardless of severity which all claims my minor child/ward or I may have (or accrue to me Valley SportsPlex, including officers, officials, agents, volunta I further agree to indemnify and hold harmless and defend Wa and/or medical personnel any treatment deemed necessary for medical services rendered.  PHOTO POLICY: The Waterloo Leisure Services and Cedar and Cedar Valley SportsPlex activities, classes, or programs or use in future program magazines, brochures, promotional liter.  REFUND POLICY: Refunds are issued in full if a class is full Approved refunds prior to the start date will be assessed a \$5 after the first meeting will be charged a \$10 administrative feas been denied, you will be contacted by a staff member from If registering online, via phone or email, my facsimile signafull understand the above important information, warning photo/video authorization.	physical mental and emo a risk of serious injury v activity, participants mu seplay, unsportsmanlike erent to indoor and outdo y SportsPlex to guarantee MPTION OF RISK and participating in the or loss which you or you when provided). that there are certain risk my minor child/ward or le or my child/ward) as a neers, independent contrac- terloo Leisure Services a my minor child's/ward'.  Valley SportsPlex may r may take photographs of ature, websites, or for use I or cancelled by the Spondministration fee. Refun The Waterloo Leisure Services Deture shall substitute for	when participate understand conduct, preson recreation absolute sand identified properties of physical may sustain result of partitors, instructors, instructors, instructors and Cedar V is immediate wideo tape of people in the e on cable terts Department. A fervices Deperarment. A rand have	rces of each participant. bating in any recreationa d that certain risks, dang emises defects, inadequa n activities/programs exi fety.  ogram(s), you will be ex ld/ward might sustain are l injury and I voluntarily n as a result of said partic icipating in the program tors, servants and emplo alley SportsPlex staff to care and I agree that I v r take photographs of pa the City of Waterloo par levision. ent. Refunds for persona be issued after team assi partment reserves the righ All refunds will be maile the same legal effect as	Despite careful and proper preparation, in a activity/program. Understandably, not a gers and injuries due to inclement weather to or defective equipment, inadequate surest. In this regard, it must be recognized the pressly assuming the risk and legal liabilising out of or as a result of the activities or agree to assume the full risk of any injurcipation. I further agree to waive and relingagainst Waterloo Leisure Services and Coyees.  Secure from any licensed hospital, physically be responsible for payment of any and ricipants enrolled in Waterloo Leisure Seks. These photographs and/or video tapes all reasons must be submitted in writing. In generate the deny a request for a refund. If your red within three weeks.  An original form signature. I have read-	all haz- r, slip- pervi- hat it is  ity, of this ries, nquish cedar  cian, ad all ervices s are for  ved request d and
X		Date			

Date