

Kent Parrot's Tennis Lessons at the South Shore Country Club



274 South Street, Hingham, Ma 02043

“A Family Club Open To The Public”

Tennis Program 2011
Junior Learn and Play Programs

Greetings from Coach Kent Parrot,

For Spring/Summer tennis season 2011, please access a 2011 reservation/registration form at either your school , at the Club, or on the Club's website www.southshorecc.com We've had over 200 kids in years past so don't wait... sign up early. All applications and accompanying checks are to be sent to:

Kent Parrot
P.O. Box 185A
Duxbury, Ma 02331

Receipt will be acknowledged by a phone call confirming acceptance of your application. Checks will be cashed as they are received to hold your spot. Our cancellation policy will remain the same: no refunds unless your spot can be filled.

I will continue to provide equipment sales and over-night racket stringing services. Our programs will continue to emphasize safety first, fun-fun-fun, and added value. But rest assured we will be “raising the bar” for any repeat customers. Should you have any questions, email me or call 617-283-4966.

Best Wishes,
Kent Parrot
Tennis- Director

Learn More At:
www.southshorecc.com
kparrotnest@yahoo.com (email)
www.kentparrot.usptapro.com (website)

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2011 Junior Learn & Play Tennis Programs

Please make checks out to KENT PARROT
Please return this form with checks for:
Pee Wee Classes: \$130 per week
Jr. Learn and Play Classes: \$160 per week

Send to: Kent Parrot
P.O. Box 185A
Duxbury, Ma 02331

Please check off the appropriate **Time/ Age** and the **Session**. All play at 274 South Street, Hingham

- | <u>Time & Age</u> | <u>Week</u> | |
|---|--|---|
| <input type="checkbox"/> 8-9:00 am Pee Wees 3 ½- 6 yrs | <input type="checkbox"/> #1 13-17 June | <input type="checkbox"/> #6 18-22 July |
| <input type="checkbox"/> 9-10:30 am 7-9 yrs | <input type="checkbox"/> #2 20-24 June | <input type="checkbox"/> #7 25-29 July |
| <input type="checkbox"/> 10:30-12 noon 10-11 yrs | <input type="checkbox"/> #3 June 27-July 1 | <input type="checkbox"/> #8 1-5 Aug. |
| <input type="checkbox"/> 12-1:30 pm 12 yrs and up | <input type="checkbox"/> #4 4-8 July | <input type="checkbox"/> #9 8-12 Aug. |
| | <input type="checkbox"/> #5 11-15 July | <input type="checkbox"/> #10 15-19 Aug. |
| | | <input type="checkbox"/> #11 22-26 Aug. |

Private/ Group Lessons on Request Call 617-283-4966

Name: _____ Sex: M F D.O.B _____ 19____

Address: _____ Home Phone: (781) ____-____

City: _____, Ma Zip: _____ Email: _____@_____

Parent/Guardian Name: _____ Work Phone: _____

In Case of Emergency Please Notify: _____ Phone: _____

Please List Any Medical Problems: _____

Authorization

I _____ Parent/Guardian, hereby give permission to said son/daughter to participate in the tennis activities at the South Shore Country Club and will hold harmless all teaching staff at the Club. I understand that tennis as a sport has inherent risks. I hereby testify to my son's/daughter's sound health of mind and body and I authorize South Shore Country Club to seek medical treatment at the nearest medical facility in case of emergency. I intend this statement to take effect as a sealed instrument.

Signature of Parent/Guardian _____ Date _____ 2011