

Radisson Junior Tennis Program Summer 2022

Pee-Wees	5-7 year-olds	8:30-9:15am	\$36
Rookies	8-11 year-olds	9:15-10:15am	\$48

All classes will meet on Tuesdays only at the Kerri Hornaday tennis courts.

All lessons will be taught by Chris Galle, USPTA CERTIFIED Instructor

In the event that class is canceled due to rain, the class will be made up on Thursday of that same week.

Session 1 ~ June 28 - July 12
Session 2 ~ July 19 - August 2
Session 3 ~ August 9 - August 23



- Minimum of 4 students/Maximum of 14
- Amounts can be prorated if classes will be missed due to vacation.
- Registration will be available up until 4 days before the start of class.
- Completed registration forms can be dropped off at the RCA office drop box.
- If you have questions, please email Chris at tnqtennis@yahoo.com
- There are no cash refunds.

Name _____ Amount Enclosed \$ _____

(Please make checks payable to Elevate Fitness)

Address _____

Phone # _____

Email: _____

Session # _____ Please circle class: Pee-wees or Rookies Resident? circle YES or NO



Health and Safety Guidelines

Public Health Disclosure: I understand that the Radisson Tennis Courts and Fields are publicly used facilities and the Radisson Community Association and Elevate Fitness cannot ensure this facility is free of COVID-19 or other infectious diseases. Use of this facility is at Participant's own risk.

Waiver Agreement: I hereby give my consent for the above named applicant to participate in tennis lessons in the Radisson Community offered through Elevate Fitness. I further release and agree to hold harmless the Radisson Community Association, Inc. (RCA) and Elevate Fitness, their employees, agents, representatives, and any volunteers from any and all injury, claims, and liabilities whatsoever that might be incurred as a result of participation in said program. I further grant the RCA, its employees, agents, representatives, and any volunteers or emergency medical personnel permission to provide my child/participant with emergency or medical treatment should that become necessary. I give permission for photos to be taken during the program to be used by RCA. (Submit written notice to revoke permission.) I have read this document carefully, understand its terms, and voluntarily sign it understanding its significance.

Parent's Signature _____

Date _____





3128 Amesbury Drive * Baldwinsville, New York 13027 * p. 315- 635-7171 * f. 315-635-7182 * www.radissoncommunity.org

RADISSON FIELD/COURT PARTICIPANT WAIVER

PLAYER’S NAME: _____

COACH/INSTRUCTOR’S NAME: Elevate Fitness/Chris Galle

GROUP SPORT: Tennis

FIELD/COURT LOCATION: Tennis Courts

DATE: _____

Waiver Agreement: I hereby give my consent for the above named applicant to participate in the group sport outlined above. I further release and agree to hold harmless the Radisson Community Association, Inc. (“RCA”), its employees, agents, representatives and any volunteers from any and all injury, claims, and liabilities whatsoever that might be incurred as a result of participation in said program. I further grant the RCA, its employees, agents, representatives and any volunteers or emergency personnel permission to provide my child/participant with emergency or medical treatment should that become necessary. I have read this document carefully, understand its terms, and voluntarily sign it understanding its significance.

Public Health Disclosure: I understand that all organizations/teams and parents/players, using RCA’s courts must comply with CDC, NYS and Onondaga County guidelines for COVID-19 and other infectious diseases.

I understand that the Radisson Fields/Courts are publicly used facilities and the Radisson Community Association cannot ensure this facility is free of COVID-19 or other infectious diseases. Use of this facility is at Members’ own risk.

Parent/Guardian Name Printed _____

Parent/ Guardian Signature _____