

# Radisson Junior Tennis Program Summer 2021

Pee-Wees	5-7 year-olds	8:30-9:15am	\$33
Rookies	8-11 year-olds	9:15-10:15am	\$45

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

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

The rain day make up day will be Thursday of that same week.

Session 1 ~ June 29 - July 13

Session 2 ~ July 20 - August 3

Session 3 ~ August 10 - 24

- 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 call 315-569-8264.
- There are no cash refunds.

Name \_\_\_\_\_ Amount Enclosed \$ \_\_\_\_\_ (Checks made payable to Elevate Fitness)

Address \_\_\_\_\_

Phone # \_\_\_\_\_

Email: \_\_\_\_\_



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

## COVID 19 Tennis Lesson Guidelines

**Temperature Check:** It is the parents'/caregiver's responsibility to check the child's temperature prior to each tennis lesson. If it is above 100.4, please do not bring your child to class. The tennis instructor will be taking his temperature daily also. If his temperature is above 100.4, class will be canceled.

**Hand Sanitizing:** Hand sanitizer will be provided at the beginning and end of class.

**When to Wear a Mask:** Children must wear masks when entering and exiting the courts. They will also be expected to wear masks when distancing 6 feet away from one another is not possible.

**Public Health Disclosure:** I agree to notify the RCA Executive Director in the event that I, or someone in my household, is diagnosed with, or is suspected to have become infected with, a serious communicable condition, including but not limited to, COVID-19. Further, I understand that the Radisson Tennis Courts and Fields 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 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: Drake’s Landing /Glacier Ridge

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 agree to notify the RCA Executive Director in the event that I, or someone in my household, is diagnosed with, or is suspected to have become infected with, a serious communicable condition, including but not limited to, COVID-19. Further, 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.

All organizations/teams and parents/players, using RCA’s courts must comply with CDC, NYS and Onondaga County guidelines for COVID-19. Guidelines include, are not limited to: participant health screenings, enforcing face masks & social distancing, mandatory quarantine as directed by CDC. There will be zero-tolerance and failure to comply with the guidelines will cause the field/court reservation to be revoked.

Parent/Guardian Name Printed \_\_\_\_\_

Parent/ Guardian Signature \_\_\_\_\_