

Sports Conditioning for Boys ages 7-11yrs Registration Form

The Racquet Club of Memphis
Tuesdays 4:30pm-5:30pm
February 22-May 25
13 weeks \$210

This new class by Dmitri Roudnev is based on his conditioning program he developed for Olympic competitors. This program is a must for athletes that want to progress in overall strength, endurance, agility, and footwork for tennis and all other sports. In addition to stretching and strengthening exercises, students will have fun executing jumps and tumbling moves on the floor and mini-tramp.

Improves core strength, balance and coordination.

10 students maximum in this class.

For more information:
Racquet Club 901-765-4409



PRINT CLEARLY

Name _____ Child Age by Jan 2011 _____ Birth date _____

Parent Name _____

Home Phone _____ Cell Phone _____

Student Address _____ City _____ State _____ Zip _____

Your Email for important announcements (**print clear**) _____

Method of Payment: Cash _____ Checks payable to Children's Ballet Theater _____ MasterCard _____ Visa _____

Credit Card Number _____ Exp. Date _____

Amount Paid _____ **Authorized Signature** _____

School Refund policy: 75% refund is given if a student withdraws within 24 hours prior to a second class. No refunds will be given after this time except in the case of a physician-verified illness. There is no pro-rating and no makeup classes. Tuition is not transferable to another session. Students cannot attend class until full payment is made. There is a \$30 fee for cancelled checks. Children's Ballet reserves the right to cancel classes due to inclement weather conditions or teacher illness. In the event of a weather condition, call the CB office one hour prior to your class time at 921-0388 for a recorded message. There are no makeup classes for weather conditions.

I have read and understand all tuition information and rules. I hereby waive any claim of liability on behalf of Children's Ballet Theater or Racquet Club, Buckman Center, or St. Mary's School, or it's personnel or officers for any injuries or for efforts to obtain treatment for my child in event that my representative or I cannot be reached. I give permission to Children's Ballet to photograph my child and use the photos for marketing purposes, including brochures, advertisements, ballet website and news articles. I understand all information stated above.

Signature Parent _____ Date _____