



# AJ's Tennis Basics

(214) 274-4453

[ajsfitness4kids@gmail.com](mailto:ajsfitness4kids@gmail.com)



## "Early Exposure.....Later Learning"

AJ's Fitness 4 Kids believes that *introducing and exposing your child to a new skill at an early age will make learning and perfecting that skill much easier later in life!* We provide a complete, fun and exciting program at your child's school that *supports physical fitness and tennis skills development.*

**Activities:** will include but not limited to:

### 5 Fundamentals of Tennis:

**Strokes** (*forehand, backhand, serve*)

**Footwork** (*directional, eye-hand-foot*)

**Physical Fitness & Conditioning** (*agility, balance, speed*)

**Equipment** (*racket, balls, net, shoes, apparel*)

**Rules of the Game** (*court lines, scoring, single & double players and good sportsmanship*)

**Attire:** *GYM/TENNIS SHOES ONLY (NO CROCS/SANDALS)* t-shirt and shorts

**Age Limit:** 4yrs - 12yrs

**Tuition:** Will prorate according to start date: see page 2 for details

**Classes:** Thursday Afternoon (Fall & Spring) Thursday Mornings (Summer)

**Please fill out and sign the permission form and waiver below:**

## Permission to Participate in Tennis

Child's name \_\_\_\_\_ Date of Birth \_\_\_\_\_ School & classroom \_\_\_\_\_

Parent's name \_\_\_\_\_ Mom cell \_\_\_\_\_ Dad cell \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip \_\_\_\_\_

Email: (print clearly) \_\_\_\_\_

**\*PERMISSION TO PARTICIPATE:** My child has permission to participate in the "AJ's Tennis program. I understand the class times & that I am responsible for the tuition plan checked on the back page. I understand that my child's picture may be used in advertisement materials for AJ's Fitness 4 Kids. *I also understand that all paid fees are non-refundable and my enrollment for the next session will automatically renew until I give a 30-day written notice.*

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

# AJ's Tennis Enrollment Form

To Reserve a spot for your child, please check method of payment, fill out forms, sign waiver release and return via [ajsfitness4kids@gmail.com](mailto:ajsfitness4kids@gmail.com) or text (214) 274-4453.

## Method of Payment:

**Fall:** \$765 (August-December)    **Spring:** \$765 (January-May)    **Summer:** \$330 (June & July)

## Payment Options:

\_\_\_\_ Zelle (214) 274-4453

\_\_\_\_ Check

\_\_\_\_ Cash

## WAIVER, RELEASE, HOLD HARMLESS AND INDEMNITY AGREEMENT

AJ's Gymnastics and Education, its affiliates, employees, insurers, vendors, assigns and agents (collectively the "Provider Parties") shall have no liability to \_\_\_\_\_ [insert customer's name] or his/her spouse and child(ren) (hereinafter collectively "Customer") for any loss, cost or expense resulting from any personal injury, loss of life, or loss of or damage to personal property, including without limitation loss of use thereof (hereinafter "Loss"), suffered or incurred by Customer or any person or party other than the Provider Parties arising from or caused in whole or in part by any and all gymnastics, swimming, or other ancillary or related activities (the "Program") undertaken by Customer while on or near Breckinridge Montessori School (the "Property"). Customer, by his/her signature below, does hereby forever release and hold harmless, for himself/herself as well as any spouse and participating minor child or children of Customer registered for the Program, and does hereby waive all rights of recovery of any kind or nature that he/she and/or such spouse and child(ren) may have now or in the future against the Provider Parties for any such Loss.

This limitation of liability applies to any Loss arising from the Provider Parties' activities and obligations related to the Program at, in or near the Property, including without limitation any duty arising because of the use or occupancy of or condition(s) of the Property and/or any contract or agreement for temporary use of the Property for the Program, whether express or implied, by statute or in tort, WHETHER SUCH LOSS ARISES OUT THE PROVIDER PARTIES' SOLE OR CONCURRENT NEGLIGENCE OR BREACH OF ANY STANDARD OF STRICT LIABILITY. This limitation will survive the expiration or termination of any contract or agreement between the parties.

Customer represents that he/she is (i) authorized to bind and by his/her signature below does bind (or will bind prior to the occurrence of any Loss), for himself/herself, a spouse, and any child(ren) for whom such person is a parent or guardian, all persons, agents, employees, invitees, or entities currently having or acquiring in the future any actual, implied, legal or equitable interest in participation in the Program and/ or the use of the Property to the obligations, agreements, and limitations of set forth herein.

AGREED:

\_\_\_\_\_

Signature of Customer

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Students Name: \_\_\_\_\_

Age: \_\_\_\_\_

Students Name: \_\_\_\_\_

Age: \_\_\_\_\_