

ENROLL NOW for August

Classes begin on the 4th



Springfield Racquet & Fitness Center

It's EASY & FUN  
With Tennis 1 2 3

Choose from 3 Class Times

Wednesdays 7 – 8pm  
August 4, 11, 18, 25

Saturdays 11am – 12pm  
August 7, 14, 21, 28

Sundays 2-3pm  
August 8, 15, 22, 29

Learn a Lifetime Sport  
Meet New People – Stay Active



**Tennis 1 2 3 is the Perfect Program to Get You on the Court and Feel Comfortable Playing Tennis.**  
All Classes Taught by Certified Tennis Pro Kim Eck, PTR, USPTA and Craig Strauch, USPTA, and Greg Piland  
Program Fee-Just \$45 for a 4 Class Session–Payment Due with Registration-Limited Class Size

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

Tennis Experience: \_\_\_\_\_ Please Circle Session Day: Tuesday Wednesday

Payment Method:  Cash  Check  CC Type \_\_\_\_\_ # \_\_\_\_\_

Print Name as on CC \_\_\_\_\_ Signature \_\_\_\_\_

**Waiver:** I understand and acknowledge the risks and activities associated with activities at Springfield Racquet & Fitness Center including but not limited to tennis, physical fitness and recreational activities, and I hereby waive, release, absolve, indemnify and agree to hold harmless each of the Releases (Springfield Racquet & Fitness Center its administrators, directors, agents, owners, officers, and employees) from any claim rising out of injury from all liability, claims, demand, losses, or damages caused or alleged to be caused in whole or in part by the negligence of the Releases or other wise including negligent rescue operations, and further agree that if, despite this release, anyone on my behalf makes a claim against any of the Releases, I will indemnify, save and hold harmless each of the Releases from any litigation expenses, attorney fees, loss liability, damage or cause any may incur as the result of any such claim.

**Consent:** I do hereby give consent to medical care, emergency or otherwise, including any necessary transportation, in event of injury to or any illness. I also consent to photographs/videos taken at the clinic, lesson or program being used for advertising and other media efforts.

Participant Signature \_\_\_\_\_ Date: \_\_\_\_\_

Springfield Racquet & Fitness Center  
Phone: 217 787-2460

3725 Chatham Road  
FAX: 217 787-2131

Springfield, IL 62704  
www.springfieldracquetandfitness.com