



**Millstone Recreation**  
 2009 Fall TENNIS REGISTRATION FORM  
 470 Stagecoach Road, Millstone Township, N.J. 08510  
 Phone: 732-917-2954 Fax: 609-208-2903



**Instructor: Ho Scott, PTR Certified Tennis Instructor (609-883-8456)**  
**Where & When: Rocky Brook Park , September 14th—October 18th**

For classes to be scheduled a minimum number of participants are needed. Classes are limited, first come first serve basis. Placement may change according to skill level at the discretion of the instructor. \* Classes & times are subject to change depending on enrollment. For additional information contact Ho Scott (609-883-8456) or the Recreation Office (732-917-2954). Private lessons available on Saturday AM. individuals or groups.

**Circle your selection.** **JUNIORS**

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Instructional program includes stroke mechanics, footwork, scoring, placement and sportsmanship.

<u>Beginners (6-9 yrs.)</u>	Mondays or Wednesday	5:00 PM– 6:30 PM
<u>Beg./ Adv. Beg. (10—13 yrs.)</u>	Mondays	3:30 PM— 5:00 PM
<u>Adv. Beg/ Intermediate . (10-13 yrs.)</u>	Tuesdays or Wednesday	3:30 PM— 5:00 PM

**Circle your selection.** **HS PREP / ADULTS**

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Beginners : An introductory program for players just starting out. **Fridays (10:30AM—12:00 AM)**

H.S. Prep( try outs only) / Advanced Beginners Adults: For players able to rally but need work on stroke production and strategy basics.  
**\*Tuesdays (5:00 PM—6:30 PM ) or Fridays (9:00 AM—10:30 AM)**

Intermediate: Well rounded players with excellent knowledge of the game, looking to become more aggressive, mentally tough, and a good team doubles player. **Thursdays (10:30 AM-12:00 PM)**

Advanced Intermediate: For players who are looking for competitive drills to get them to the next level. Try outs only.  
**Thursdays (9:00 AM—10:30 AM)**

**Registration fee: \$125.00**

**Late fee:** All registration forms **received** after **Sept. 8th** will be charged a \$30.00 late fee.

**PLEASE PRINT:**

Participant's Name \_\_\_\_\_ Male/Female \_\_\_\_\_ AGE \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Home # \_\_\_\_\_ Cell # \_\_\_\_\_

Parent's Names (If participant is a child) \_\_\_\_\_ Child Shirt Size—Circle one

\_\_\_\_\_ Youth M (10/12) L (14/16)

Emergency # \_\_\_\_\_ Adult S (34/36) M (38/40) L (42/44) XL (46/48)

**CONSENT AND RELEASE:** I do hereby release, absolve and waive any and all claims or actions against this recreation program's organizers, sponsors, volunteers, officials, coaches, participants or other agents and employees arising out of the transportation, playing equipment, instruction, management, coaching, etc., in connection with the operation of this program. In the event of an emergency, accident, or injury which occurs while this person is participating in the recreation program to secure whatever emergency transportation, medical, and/or hospital care which may be necessary. I further agree to be financially responsible for such care and treatment.

**DATE:** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_