



Decatur Area Junior Tennis Program Winter 2018/2019 Registration Form

The Decatur Area Junior Tennis Program is held at the Decatur Athletic Club during the fall, winter and spring months. **Open to all junior players (YOU DO NOT NEED TO BE A MEMBER OF THE DECATUR ATHLETIC CLUB)**. Below are the programs available for ages 3-18. **All programs begin on Thursday, November 1st**. A minimum number of students are needed to start each class. You may join a clinic at any time (with the cost prorated from the start date). You are obligated to finish the session once you start. Please contact Cory Sandgren at 423-7020 or Cory@decaturathleticclub.com if you have any questions. If this schedule does not work for you, please inquire about creating other options.

Payment Options

You may choose to pay for the whole session upfront or have monthly payments automatically withdrawn through an EFT (withdrawals will happen on the 10th of each month.)

Terms

These terms are for the fall, winter, and spring sessions (summer is a separate registration.) Once you are signed up for a session, you are obligated to finish that session. For your convenience, your child will be automatically enrolled into the next session.

If you choose not to continue or need to change programs, you must let us know by email (no verbal notices) at Cory@decaturathleticclub.com by the 15th of the month prior to the next session starting. We do not offer refunds for any portion of your paid term. In the case of injury or illness, each case will be reviewed individually.

If payment has not been made by the first month of each term, we reserve the right to drop you from the class and give the spot to someone else. If your check is returned for any reason, you are responsible for a \$10 return check fee.

After the spring session, all students will be dropped from their programs. The programs during the summer months requires new enrollment.

Session Schedule:

Fall Session: September - October

Winter Session: November - March

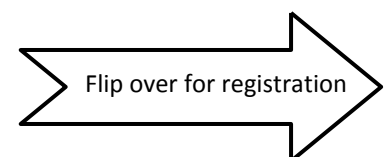
Spring Session: April - May

Summer Session: June – July (Requires separate registration)

Payment will be automatically withdrawn through an EFT on the 10th of each month if you choose to enroll in monthly payments. To receive the best communication possible and receive periodic reminders, we ask that you keep a current email address on file. If you are not receiving email updates and you would like to receive them, please update your email address with us.

Financial Aid Available

The Decatur Community Tennis Foundation offers financial aid to dedicated junior tennis players. Please contact Chuck Kuhle, President of the DCTF, at 217-423-7020 for a confidential discussion. You may also email him at Chuck@decaturathleticclub.com.



Pee Wees: (ages 3-5)

- Monday 5:30-6:00 p.m.
- Monday 6:00-6:30 p.m.
- Friday 11:00-11:30 a.m.
- Saturday 10:00-10:30a.m.

Member Price

- 5 pmts of \$43
- 5 pmts of \$43
- 5 pmts of \$48
- 5 pmts of \$48

Non Member Price

- 5 pmts of \$49
- 5 pmts of \$49
- 5 pmts of \$54
- 5 pmts of \$54

Quickstart I: (ages 6-8)

- Monday 4:30-5:30 pm
- Thursday 4:00-5:00 pm
- Saturday 1:30-2:30 pm

- 5 pmts of \$67
- 5 pmts of \$70
- 5 pmts of \$74

- 5 pmts of \$76
- 5 pmts of \$80
- 5 pmts of \$84

Quickstart II: (ages 8-10)

- Tuesday 4-5:30 pm
- Thursday 4-5:30 pm
- Saturday 12-1:30 pm

- 5 pmts of \$92
- 5 pmts of \$96
- 5 pmts of \$101

- 5 pmts of \$103
- 5 pmts of \$108
- 5 pmts of \$114

Future Stars: (ages 11-14)

- Tuesday 4-5:30 pm
- Wednesday 4-5:30 pm
- Saturday 10:30-12 pm

- 5 pmts of \$92
- 5 pmts of \$96
- 5 pmts of \$101

- 5 pmts of \$103
- 5 pmts of \$108
- 5 pmts of \$114

High School

- Wednesday 4:00-5:30 pm
- Friday 4:00-5:30 pm
- Saturday 10:30-12:00 pm

- 5 pmts of \$96
- 5 pmts of \$101
- 5 pmts of \$101

- 5 pmts of \$108
- 5 pmts of \$114
- 5 pmts of \$114

***Monday and Tuesday classes meet 19 times, Wednesday and Thursday classes meet 20 times, and Friday and Saturday classes meet 21 times.**

If you choose not to enroll in monthly payments, the full session price will be due at the time of registration. Pricing above is for the Winter 2018-2019 term only. Program pricing may vary for the Spring session.

Child's Name: _____ DOB: _____ Phone _____

Address: _____ City, State, Zip _____

Member Non-member

Paid In Full Paid: \$ _____ check cash credit card house account (DAC members only)

Monthly Payment Option: Paid: \$ _____ **Please note 1st Payment is due at time of registration/EFT must be kept on file.**

Parent's Name _____ Parent Phone #1 _____

Parent Email: _____ Parent Phone #2 _____

Credit Card # _____ Exp Date: _____ CSV _____

X _____

Signature

Do you prefer to be contacted via: Email Text Call (Please circle all that apply)