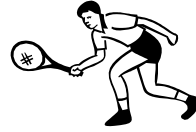


Date received: \_\_\_\_\_

# WSTC 2008 Junior Tennis Registration Form



Register for either one or two weeks. Since our hope is to accommodate each family, **there is a two-session maximum per child.** Deadline is May 1<sup>st</sup>. **First come, first enrolled upon receipt of the registration form and payment.** Checks should be made payable to WSTC Tennis.

Mail form and check to: Eileen Marks  
20 Maxwell Road  
Winchester, MA 01890

\*\*\*\*\*

Child's Name	Age	Experience Level	Session(s)
_____	___	_____	_____
_____	___	_____	_____
_____	___	_____	_____
_____	___	_____	_____

Payment received: \_\_\_\_\_

\*\*\*\*\*

### Additional Sessions

If you are interested in additional sessions, please list them below in order of preference. You will be notified by the tennis pros if there is space **after the initial enrollment period has been scheduled.** Payment will be required at time of registration for these additional sessions.

Child's Name	Age	Experience Level	Session(s)
_____	___	_____	_____
_____	___	_____	_____
_____	___	_____	_____
_____	___	_____	_____

\*\*\*\*\*

Parent's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone #s: Home: \_\_\_\_\_ Cell: \_\_\_\_\_