For staff use only Team

Payment

Date Paid

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Robinswood Tennis Center

Junior Team Registration Form

Fall Session 1 2021 September 7 – October 23

* Evaluations will be held on two separate days. Provide your form in advance to secure a spot for one of the days. Tryout forms can be dropped off at the front desk starting August 18th. First come basis to secure a spot.

If participants make a team, payment for class is needed by start of second week.

Robinswood Tennis Center does not give refunds or prorate fees. Credit may be given, but only under special circumstances. Management approval is required

Mail to:	Robinswood Tennis Center	Fax-in to:
	P.O. Box 90012	Drop-off at:
	Bellevue, WA 98009-9012	Questions?

Please Print:

Adult Last Name

Street Address

First

City

Zip

Day Phone (including Area Code)

Evening Phone (including Area Code)

(425) 649-4353

(425) 452-7690

2400 – 151st PL SE, Bellevue

Email_

Participant's Name	Date of Birth	Day & Time	Class Name and Course #	Class Fee
		Saturday 9:00am – 10:00am (Tryout date: Sept. 11 th)	Prep Team2108438	\$72
		Saturday 9:00am – 10:00am (Tryout date: Sept. 18 th)	Prep Team2108438	\$72
		Tues/Thur 4:00pm – 5:15pm Tuesday tryout date: Sept. 7 th	Team I 2108441	\$156
		Tues/Thur 4:00pm – 5:15pm Thursday tryout date: Sept. 9 th	Team I 2108441	\$156
		Tues/Thur 5:15pm – 6:30pm Tuesday tryout date: Sept. 7 th	Team II 2108440	\$156
		Tues/Thur 5:15pm – 6:30pm Thursday tryout date: Sept. 9 th	Team II 2108440	\$156
		Mon/Wed/Fri 5:15pm-6:30pm Wednesday tryout date: Sept. 8 th	Tournament Team 2108439 **Intermediate or Advanced Rankings required	\$228
		Mon/Wed/Fri 5:15pm-6:30pm Friday tryout date: Sept. 10 th	Tournament Team2108439**Intermediate or AdvancedRankings required	\$228
		Mon/Wed/Fri 4:00pm-5:15pm Wednesday tryout date: Sept. 8 th	Elite Team 2108442 **Advanced Ranking Required	\$228
		Mon/Wed/Fri 4:00pm-5:15pm Friday tryout date: Sept. 10 th	Elite Team 2108442 **Advanced Ranking Required	\$228

PHOTO/VIDEO RELEASE: I, the undersigned participant and/or parent or guardian of the minor participant, give my permission to have photos/video tapes taken, without recompense, during City of Bellevue activities and used for publicity purposes.

Signature(s):_

REGISTRATION NOT VALID without signed waiver.

Date: ___