



SUMMER TENNIS TRAINING 2021

6/14/ – 8/27 (11 WEEKS)

JUNIOR RANKED

9:00am – 12:30am | 5 days/week | \$375/week

*Sign-up for consecutive training for
3 - 5 weeks | \$365/week
6 weeks or more | \$360/week

JUNIOR CHALLENGER YOUNG JUNIOR

9:00am – 12:00am | 5 days/week | \$325/week

*Sign-up for consecutive training for
3 - 5 weeks | \$315/week
6 weeks or more | \$310/week

AFTER SCHOOL HOURS (Junior Challenger & Young Junior)

**6:00pm – 8:00pm
Every Tuesday, Wednesday, Friday
\$52/class**

**19000 WOODFIELD RD. SUITE 200
GAITHERSBURG, MD 20879**



hong_tennis@yahoo.com



(301)-637-2048
(301)-208-8288

www.HongTennis.com

Please submit registration form now online or in-person and complete payment at the same time.

We accept all major credit cards, cash, Paypal and personal checks made payable to HTTC.

3% service charge will be applied for credit card user.



COVID-19 GUIDELINES

- All summer trainings will be held at outdoor courts.
- All members training must bring their own bag(s) with their own equipment, including hand sanitizer, disinfectant wipes, masks, gloves, and water.
- All members training, including coaches, shall maintain social distancing measures recommended by the CDC (6 feet or more) at all times.
- Please stay home if you or your child is feeling unwell or have a fever. We will spot check temperature periodically to help maintain health and safety protocols.
- Coaches will check their own temperature daily.
- Coaches will handle balls with gloves. All equipment used will be sanitized after each session.

We hope to create a fun and safe training environment, where all players & family will be responsible for his/her own safety and hygiene.

It is understood that the student is in overall good physical health. In the event that there is a physical condition that may limit or restrict participation in certain activities, a physician's not granting permission to participate in such activities must be presented prior to the first class session.

Medical Authorization:

In an emergency, when I/we cannot be contacted, I/we hereby authorize the staff of the Hong Tennis Training Center (HTTC) to take my/our child to the emergency room of the nearest hospital. I/we authorize that hospital and its medical staff to provide treatment deemed necessary for the well-being of my/our child.

Release: By signing this document, I agree to hold the Hong Tennis Training Center (HTTC) harmless for injury or loss that may occur as a result of my participation in HTTC activities.

Parent/Guardian Signature:

Date:

REGISTRATION FORM

* Please list the program name, time, weeks, or dates you wish to participate below in the Programs section.

Name

Age

Male / Female

Address

Home Phone

Cell Phone

E-Mail

Programs