





SUMMER SESSION: JUNE 9TH- AUGUST 17TH (10 WEEKS)

No classes Friday, July 4th.

CLASS	СОАСН	DAYS & TIME	WEEKLY ENROLL
JV 1/2	Dan, Sue	T/W/TH, 1:00PM- 3:00 PM	\$180
H.S. Training Center	Dan, Jake A., Annette	T/W/TH, 3:00 PM- 5:00 PM	\$180
HS Academy	Tim, Annette	T/W/TH, 3:00 PM- 5:00 PM	\$180

WEEKLY SIGN UP PLEASE CIRCLE WEEK SIGNING UP FOR:								
JU	NE 10-12	JUNE 17-19	JUNE 24-26	JULY 1-3	JULY 8-10			
JUI	LY 15-17 J	ULY 22-24	JULY 29-31	AUGUST 5-7	AUGUST 12-14			
PLAYER INFORMATION								

PLATER INFORMATION								
FIRST NAME				LAST NAME				
DATE				PHONE				
Do you have more than one child in the JV & HS level? (2nd child 10% off; 3rd child 20% off) Y or N								
FINANCIAL INFORMATION								
PAYMENT		Charge to Club Account]Pay	with Credit Card on Fi	le Pay with New Card			
Credit Card Number Expiration								
I understand that I am financially responsible for fees and dues associated with my program participation at Five Seasons Family Sports Club.								

PROGRAM POLICIES

1. Membership required.

2. Complete all information on this form & turn into the front desk.

3. Availability based on time & date form is received.

4. Pro-rating will be accepted for medical reasons only (doctor's note required) or for approved late

start. Must contact Annette Cremin at acremin@5ssc.com within two weeks of injury/illness/prorating.

5. Parent/Guardians please sign the Financial Responsibility Agreement above.

6. No refunds after start date as well as adjustments to bill after session has finished.

7. No make-up for missed classes.

8. Player placement is subject to pro approval.

WAIVER OF LIABILITY

I accept responsibility for my use of any and all apparatus, appliances, facility, privilege or service whatsoever and operated at the club at my own risk, and shall hold this club, its owners, shareholders, directors, officers, employer's representatives and agents harmless from any and all loss, claim, injury, damage, or liability sustained or incurred by me resulting therefrom. I will follow all Five Seasons guest policy rules and policies.

Signature _

Date ___

Director of Tennis: Annette Cremin | 630-570-5206 | acremin@5ssc.com

To register, please email completed form: Annette Cremin at acremin@5ssc.com or drop off completed form at front desk.

\$25 WEEKLY UPCHARGE FOR NO REG. FORM COMPLETED BY: THURSDAY @ NOON PRIOR TO WEEK PARTICIPATING IN.

Fall 2025 Session August 18 - November 3, 2025 Registration Opens June 16, 2025

3.3.2025