

# Teddy Tennis



## HOLY CROSS NURSERY SCHOOL

125 Glasgow Terrace, Mahwah, NJ 07430

Teddy Tennis is a fantastic FUN way to encourage young children to get active and learn to play tennis. It works by combining music, pictures, teddy bear stories and stickers into a totally interactive learning adventure that young children love.

To find out more about Teddy Tennis go to www.TeddyTennis.com

Please check the box of the appropriate class.
Children do not have to be enrolled as a student at Holy Cross to participate.



#### Tim Bear Team

3 - 4 year old or children enrolled in First Step and/or Level One at Holy Cross Nursery School Friday 12:00 - 12:45



#### Johnny Bear Team

4 - 5 year old or children enrolled in Level Two at Holy Cross Nursery School Friday 12:45 - 1:30

Teddy Tennis is a curriculum based program; therefore, we cannot enroll children after the 4th week of the session.

Class size is limited to 8 children. All equipment is provided for use during the class.

Teddy Tennis does not credit, refund or offer a makeup for missed classes.

2018 Spring Session: March 23, April 6, 20, 27, May 4, 11, 18, 25, June 1, and 8. No classes scheduled on March 30 and April 13. 10 weeks - Fee: \$200.00 per Cub Cadet (child)

All Cub Cadets receive: A Teddy Tennis Cub Card per session, Activity stickers each week, and a Completion Certificate.

Cub's FIRST NAME:		IAME:	Lefty or Righty if known:
Cub's DOB:			Grade as of September 2016
			Home Phone:
			T
Check #		Please make checks payable and send to: I Love Teddy Tennis, LLC, 195 County Road, Tenafly, NJ 07670	Credit Cards accepted through our online enrollment system only.
	Check #	LAST N Email: Parent/Cell Pho	Parent/Guardian's Cell Phone  Check # Please make checks payable and send to: I Love Teddy Tennis, LLC, 195 County Road, Tenafly, NJ

Online enrollment is available at <a href="https://www.teddytennis.com/bergencounty">www.teddytennis.com/bergencounty</a>

Parent or guardian must sign indicating that your child is in good physical condition and has no illness or other conditions which would preclude him/her in the Teddy Tennis program. If there is anything about your child's health/medical history that Teddy Tennis should be aware of please write on the back of this form.

Parent/Guardian's Printed Name:	Signature:

Please complete the Consent and Release Form along with this Enrollment Form.

Contact: The Teddy Tennis Academy, bergencountyinfo@teddytennis.com or call 201 600-7698 for more information or to enroll.







### I Love Teddy Tennis Holy Cross Nursery School Consent and Release Form



This is to acknowledge, confirm and state that	, or if the participant is a minor, his/her parents
managers, employees, affiliates, professionals, coaches, to (the "Released Parties"), harmless from and against any without limitation, loss of future earning ability, from and use of facilities, coaching, physical therapy or physical active acknowledge and agree that the undersigned enters onto The undersigned, or if the undersigned is a minor his parestrenuous and inherently involves risk of injury and there coaches and services understanding and fully accepting whatsoever against any of the Released Parties arising of Consent and Release is intended to insulate the Released interpreted as broadly as possible to so accomplish its in guardians on his and their behalf, understand that the Rel Consent and Release in admitting the undersigned onto its coaching involved therewith.  I do hereby further declare my child to be physically soci illness that would prevent his/her participation of use acknowledge that I have been informed of the need for a printer that it have been informed of the need for a printer use of exercise equipment and machinery. I acknowledge that I have been informed of the need for a printer use of exercise equipment and machinery. I acknowledge that I have been informed of the need for a printer use of exercise equipment and machinery. I acknowledge that I have been informed of the need for a printer use of exercise equipment and machinery. I acknowledge that I have decided approval of my physician and do hereby assume all responses.	Participant's Name ase and hold I Love Teddy Tennis LLC (the "PROVIDER"), its agents, members, eachers, trainers, investors, officers or anyone else connected with PROVIDER and all injury, loss, damage, claim or asserted claim whatsoever, including on account of any admittance to PROVIDER's premises, its services, training, ity, whether on or off premises, PROVIDER's facilities or otherwise, and further of PROVIDER's facilities and engages its services at the undersigned's own risk. Ents or legal guardians on his and their behalf, recognize that athletic training is refore enter onto PROVIDER's premises and facilities, and accept and engage the risk and agree, covenant, assert and promise not to make any claim ut of, or connected with, the use of PROVIDER's facilities and services. This I Parties from any and all liability whatsoever and is therefore intended to be attent. The undersigned, or if the undersigned is a minor, his parents or legal eased Parties are relying on the broadest interpretation and protection of this premises and facilities and allowing the undersigned to retain the services and and suffering from no conditions, impairment disease, infirmity, or other of equipment and of machinery except as hereinafter stated. I do hereby hysician's approval for my participation in an exercise/fitness/sports activity, or nowledge that I have either had a physical examination and been given my and to participate in activity and use of equipment and machinery without the onsibility for my participation and activities, and utilization of equipment and apphase or videotapes of the students in our program to be used for publicity or
Mother's/Guardian's Signature:	Date:
(Please specify) Print Name: Print Address: Phone:	
Father's/Guardian's Signature:(Please specify)	Date:
Print Name:	
Print Address:	
Phone:	
Anything in your Child's health/medical history that Ted	dy Tennis should be aware of: