

# **TOMPKINS TENNIS REGISTRATION**

## **LIVERMORE VALLEY TENNIS CLUB**

### **WINTER/SPRING 2016**

#### **Easy steps to registration:**

1. Choose program(s) and session(s) on this side of this card.
  2. Choose number of days if applicable.
  3. Provide student, parent and payment information on reverse side of this card.
  4. Mail this form.
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#### **Livermore Tennis Training**

- ☐ Session 1 - January 4 - January 31
  - ☐ Session 2 - February 1 - February 28
  - ☐ Session 3 - February 29 - March 27
  - ☐ Session 4 - March 28 - April 24
  - ☐ Session 5 - April 25 - May 22
  - ☐ Session 6 - May 23 - June 19
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#### ☐ Ranked Junior Program:

*Circle days of attendance:*

*Mon Tue Wed Thurs*

#### ☐ Tournament Training 12 and Unders:

*Circle days of attendance: Sun*

#### ☐ Training Program II:

*Circle days of attendance: Tue Fri Sun*

#### ☐ Training Program III:

*Circle days of attendance: Mon Wed Sat*

#### ☐ Junior Masters:

*Circle days of attendance: Tue Sat*

#### ☐ Junior Aces:

*Circle days of attendance: Wed Fri Sat  
(10:30am) or Sat (4:00 pm)*

#### ☐ Future Slammers:

*Circle days of attendance: Wed Fri Sat*

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#### **Programs:**

- ☐ Training Program II
- ☐ Training Program III
- ☐ Junior Masters
- ☐ Junior Aces
- ☐ Future Slammers

**Student Information:**

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Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

☐ Boy ☐ Girl      Level: \_\_\_\_\_**Parent/Guardian Information:**

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Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Alt. Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Payment Information:**

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Charge my: ☐ Visa or ☐ MasterCard

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Expiration: \_\_\_\_\_/\_\_\_\_\_

Sign: \_\_\_\_\_

Print Name: \_\_\_\_\_

☐ Livermore Valley Tennis Club

Member # \_\_\_\_\_

**Mail Registration Form & Payment to:****Tompkins Tennis**

43255 Mission Boulevard, Suite 101

Fremont, CA 94539 | (510) 573-4025