

LOCKPORT SUMMER PARKS RECREATION TENNIS PROGRAM  
REGISTRATION FORM: **ADULT TENNIS LESSON REGISTRATION FORM**

Name \_\_\_\_\_

Address \_\_\_\_\_, \_\_\_\_\_

Check one: Resident of City \_\_\_\_\_ Town \_\_\_\_\_ Other \_\_\_\_\_

Phone: Cell \_\_\_\_\_ Home \_\_\_\_\_ T-shirt size \_\_\_\_\_

E-mail address \_\_\_\_\_

ABILITY LEVEL

\_\_\_\_\_ Beginner                      \_\_\_\_\_ Intermediate                      \_\_\_\_\_ Advanced

LESSON TIMES\*

\*subject to change

**Tuesdays: 7/2 - 7/30 (Rain Date 8/6)**

\_\_\_\_\_ 5:45-6:40 Beginners/Intermediate

\_\_\_\_\_ 6:45-7:40 Advanced

Check any other nights you may take in case of rain or need for more classes:

\_\_\_\_\_ Monday      \_\_\_\_\_ Wednesday      \_\_\_\_\_ Thursday

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SURVEY: *How did you find out about these lessons? Check any that apply*

\_\_\_\_\_ Newspaper(s)      \_\_\_\_\_ "Word of mouth"      \_\_\_\_\_ Coach/teacher

\_\_\_\_\_ E-mail      \_\_\_\_\_ Lockport website      \_\_\_\_\_ Sign

\_\_\_\_\_ other \_\_\_\_\_

**PLEASE RETURN THIS AT REGISTRATION TO THE TEACHERS, WHO WILL ENROLL YOU. FOR MORE INFORMATION, CONTACT BRANDON REID AT 716.345.0993**

-----STAFF USE ONLY)-----

Paid: \_\_\_\_ Cash \_\_\_\_ Check (#\_\_\_\_\_) payable to: **City of Lockport**

Amount\_\_\_\_\_