

Wolbrecht Tennis Center

Session 2 - October 20 - December 20, 2025

SCHEDULE & FEES Red Ball Group Ages 5-6

Classes held on indoor courts

M-W 4:00pm-5:00pm

\$288 per 9 week session / 2 days per week / 1 hour per day

Saturday 9:00am-5:00pm

\$288 per 9 week session / 2 days per week / 1 hour per day

Orange Ball Group Ages 6-11

M/W 5:00pm-6:00pm Classes held on indoor courts \$288 per 9 week session / 2 days per week / 1 hour per day **Saturday 10:00am-11:00am** Classes held on outdoor courts \$144 per 9 week session / 1 days per week / 1 hour per day

Green Ages 8-11 or Yellow Ball Group Age 10+ beginner to advance level

T/TH 4:00pm - 6:00pm (Classes held on indoor courts) \$576 per 9 week session / 2 days per week / 2 hours per week Saturday 10:00am - 12:00pm (Classes held on outdoor courts) \$288 per 9 week session / 1 day per week / 2 hours per day

For students who are unable to commit to the full program we provide the option to register for the days that they are able to attend. This option will be available as space permits and is not guaranteed.

Daily Rates Apply \$18 / 1 hour, \$36 / 2 hours

FINANCIAL ASSISTANCE IS AVAILABLE - Contact Steve Phillips, Accounting for more information at sphillips@tennismemphis.org

If you are not sure or have questions on which group to register your student, contact Tennis Center Director

Jay Robillard at irobillard@tennismemphis.org

Wolbrecht Tennis Center

Session 2 - October 20 - December 20, 2025 (9 week session) JD PROGRAM REGISTRATION FORM

First Name		Last Name	Last Name		Male Female	
Birthdate/Gra	ade in 2025	School				
Address		Cit	ty State	e Zip		
Parent/Guardian		Cell # Email:				
Program	Ages	Days	Time	Fee	Select	
Red Ball	5–6	Mon/Wed	4:00 PM – 5:00 PM	\$288		
		Sat	9:00 AM – 10:00AM	\$144		
Orange Ball	6–11	Mon/Wed	5:00 PM - 6:00 PM	\$288		
		Sat	10:00 AM – 11:00AM	\$144		
Green / Yellow Ball	8-18	Tue/Thu	4:00 PM – 6:00 PM	\$576		
		Sat	10:00 AM – 12:00PM	\$288		
Select Class Red Ora Select Number Days Per Wee	k 2 Days	1 Day				
Select Days Per Week M	TW	TH				
TOTAL PAYMENT \$	Session	9 weeks X	Days per Week X \$ D	Daily Rate		
WAIVER, RELEASE & AUTHORIZATION I, the undersigned parent/guardian, he program, I hereby indemnify and respective employees, staff, board me illness which may be suffered by my coillness. I, the undersigned, have read understanding of its significance. PUB media and Tennis Memphis for purpo AUTHORIZATION: If I cannot be reach event of any injury to my child while proverage, I will pay all costs of medical	ereby consent for hold harmless the embers, officers, a hild arising out of this release and u LICITY RELEASE: I ses of website, so ed in an emergen participating in an	e City of Memphis, Tagents, successors. In four in any way conner inderstand all of its to hereby give my consocial media, marketing, I hereby authorized y program activity. I	ennis Memphis and any sponsors release the same from any and all ected with the program, and assuerms and hereby execute voluntarient for my child to be interviewed g, advertising, or newspaper pube any medical assistance or treatmagree that if my child does not ha	of the program liability for an me the risk for rily, with all kno d or photograp lication. PAREN ment deemed r	n and its y injury or such injury o owledge and shed by the IT'S necessary in t	
Signature of Parent/Guardian				Date		