

Ladies Interclub Team

Enjoy competition against area clubs. Play consists of a weekly practice and a doubles match. Matches Tuesday Mornings. Practice Monday.

Cost is \$18 per practice.

Contact Jeff Roman for more details.

Tennis Socials

Fourth Fridays

Enjoy food, drink, and tennis at our Friday evening socials.

May 24th, June 21st, July 26th and August 23rd



Two convenient entrances:

3939 Virginia Avenue or 3950 Red Bank Road
Cincinnati, Ohio 45227

For tennis please use Virginia Ave. parking lot.

513.527.4000

All physical activity carries with it inherent risks to individuals of all ages. The fitness equipment and the facility in the Cincinnati Sports Club present **Assumption of Risk, Release of Liability, Indemnity, Authorization:** All physical activity carries with it inherent risks to individuals of all ages. The fitness equipment and the facility of the Club present hazards which, if not avoided, can cause serious injury or death.

As consideration for my being permitted to use the Club or its programs, I EXPRESSLY AND VOLUNTARILY AGREE TO ASSUME ALL RISK OF SERIOUS INJURY OR DEATH and HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE THE CLUB GROUP with respect to any and all liability (including liability arising from the negligence of the Club Group) for claims, causes of action, injuries including death, damages, costs, loss of services, expenses, theft, attorney's fees, and other claims, known or unknown, of whatever nature arising out of the premises or programs of the Club Group (collectively, "Claims"). Furthermore, I agree to indemnify, defend, and hold harmless the Club Group from and against: (i) any such Claims by the undersigned or by others; and (ii) any related fines, fees, or expenses, including attorney fees. I agree that this Release applies to me, any family member or guest ("We") and to each and every use we make of the Club.

I expressly agree that the release, assumption of risk, and indemnity herein is intended to be as broad and inclusive as is permitted by the law of the State of Ohio and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. I hereby authorize the Club to contact me by telephone, email, or otherwise regarding the Club, including soliciting me for membership.

Responsibility for medical conditions: signs and labels; notifying staff. I understand that I am responsible for monitoring my condition at all times. If during use of the Club unusual medical symptoms occur, I will cease my participation and seek prompt medical attention. Prior to using the equipment or facility I will read all warning labels, instructions, signs and placards in the facility. If I am unsure how to use the equipment or facility, I will seek the assistance of staff. I will immediately report any piece of equipment or area of the facility that is not functioning properly to staff. I will not attempt to use or fix any piece of equipment or area of the facility that is not working properly.

Ohio law and Waiver of Jury Trial: This agreement and any claim, controversy or dispute arising out of it, or arising out of use of the Club, shall be governed by and construed in accordance with the laws of the State of Ohio. The undersigned hereby knowingly, voluntarily, and unconditionally waives the right to a jury trial of any claim, controversy or dispute arising out of this agreement, or arising out of the premises or programs of the Club Group.

Release, assumption of risk, and agreement as to minors: With respect to participation by a minor, I, the undersigned parent, guardian, or custodian of the minor, for myself and on behalf of the minor, hereby: (a) voluntarily assume all of the risks of physical activity and risks of use of the premises as described above; (b) RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE THE CLUB GROUP with respect to any and all liability, per the terms stated above; and (c) agree that all other terms of this agreement apply to the minor.

Member Name: _____

Member Signature: _____

Date: _____

ADULT TENNIS CLINICS



Spring, Summer & Fall 2019

**Clinics Begin April 1st
Morning, Evening, & Weekend Clinics
Private Lessons Available**

**Register Early-
Enrollment is Limited!**



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Cincinnati, Ohio 45227

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CincinnatiSportsClub.com

INSTRUCTIONAL CLINICS

CLINICS & FEES

REGISTRATION

Weekday Classes

Beginner Drill Clinic:

AM-Thursdays 10:30AM-11:30AM
 PM-Tuesdays 6:30PM-7:30PM

D & P Clinic (Drill and Play Clinic) Advanced Beginner/Intermediate

This class is offered for those players who are looking for a transition from clinics to more point and match play. This class will consist of forty-five minutes of live ball point play, then finish with fifteen minutes of match play.


AM-Fridays 10:30AM-11:30AM
 PM-Mondays 5:30PM-6:30PM

Intermediate/Advanced Drill Clinic:

AM-Wednesdays 9:30AM-10:30AM
 PM-Wednesdays 6:30PM-7:30PM

Men's Intermediate Drill Clinic:

PM-Mondays 6:30PM-7:30PM



Drop-In Cardio Tennis

PM-Thursdays 6PM-7PM
 Class Runs from April 18-October 3
 AM-Saturdays 9AM-10AM
 Class Runs from June 1- September 28

Cardio classes have no sessions and no RSVP necessary.
 Cost is \$18 members and \$23 non-members

Clinic Dates

6 week sessions - except session 5

Clinic 1 **April 1-May 11**
 Clinic 2 **May 13-June 22**
 Clinic 3 **June 24-Aug. 3**
 Clinic 4 **Aug. 5-Sept. 14**
 Clinic 5 **Sept. 16-Oct. 5**

(only 3 weeks)

Group Clinic Fees

	Member	Non-Member
Clinic 1-4	\$97	\$120
Clinic 5	\$48	\$57

Private Lesson Fees

	Member	Non-Member
Head Pro		
Jeff Roman	\$64	\$74
Asst. Pro	varies by instructor	

- 1/2 hr. sessions and 45 minute available.
- Semi-private options available
- Any no-show or lesson that is cancelled without 24 hour notice will be billed at the full price.

Cancellations and Refunds Cancellations must be made at least one week prior to the start of the session in order to receive any refund. An administration fee of \$25 per session will be deducted from all refunded amounts. No refunds will be given for days missed. All cancellations must be made in writing with a full signature and date.

	BEGINNER CLINIC		LADIES INT. CLINIC		MENS INT. CLINIC	D & P CLINIC	
CLINIC	AM	PM	AM	PM	PM	AM	PM
Clinic 1							
Clinic 2							
Clinic 3							
Clinic 4							
Clinic 5							

Adult Tennis Registration - \$25 processing fee

Non-Members must pay in full for all registered sessions. Members (participant must be the member) who do not pay in full at registration will have their Sports Club account charged at least one week prior to the date of camp. Make checks payable to "Cincinnati Sports Club," 3950 Red Bank Rd, Cincinnati, Ohio 45227.

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone _____

Member Non-Member

METHOD OF PAYMENT

Bill to member account

Credit Card: Visa Mastercard Discover

Credit Card # _____

Exp. Date _____ 3-digit code on back card _____

Signature _____ Date _____

I hereby permit the Cincinnati Sports Club to record participants performance on print, digital, or video medium for use in promotion and distribution.

X _____