



TTP/RENEWAL 2018-2019

16 Week Session

Ages 13 and up

I would like to reserve a spot to the following TTP session(s):

Program	Day	Time	Price
<input type="radio"/> TTP	Monday	6:00-7:30pm	\$1075
<input type="radio"/> TTP	Tuesday	6:00-7:30pm	\$1075
<input type="radio"/> TTP	Thursday	6:00-7:30pm	\$1075
<input type="radio"/> TTP	Sunday	2:30-4:00pm	\$1075

\$700 deposit per program-PIF by November 1st

Name: _____ **email:** _____

Payment Information:

This payment is my: ____ Deposit

Check/Cash payment enclosed in the amount of \$_____.

____ Payment in Full

Please charge my credit card on file in the amount of \$_____.

Please charge the credit card listed below in the amount of \$_____.

MC/Visa: _____ CCV#: _____ Expiration Date: _____

I understand that the above deposit is required for participation in this program and that this application must be accompanied by the required deposit to confirm registration. I further understand that for 16 week programs I must pay in full by the 8th session. ***There are no refunds for missed classes.*** I must notify the Director per email of any missed classes ahead of time, as to have the best chance for a make-up class if available. If my account is not paid in full as required, I consent that POINT SET may charge my checking/credit card account for the full amount past due. By signing below I agree that I am the parent or legal guardian of the above student and that we will abide by all the rules and regulations which now exist or which may be hereafter adopted or amended by the management of the club.

Parent's/Guardian's Signature

Date