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# Special Aces Junior Development

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The Prospect Park Tennis Center offers group tennis instruction for children with special needs. Our accomplished staff of tennis professionals and qualified physical and occupational therapists provide your child with the special attention they need to enjoy the experience of tennis.

Players 6–18 years old are grouped according to age and ability.

Sports wheelchairs are available (limited)–register early.

Basic fundamentals and instruction are presented in a fun and innovative way.

To sign up, please complete the registration form. Scholarships are available. Please inquire for an application.

The Prospect Park Alliance Special Aces program is made possible through generous support from the Bulova Stetson Fund, and the J.E. + Z.B. Butler Foundation.

**Begins October 27, 2019**

**Space is limited!**

**Sunday, 1–2 or 2–3 pm**

**7 sessions for \$105**

**First Session:**

**October 27–December 15**

(no class Dec 1)

**Second Session:**

**January 5–Feb 23**

(no class Feb 16)

**Third Session:**

**March 1–April 26**

(no class April 12+19)

**The Prospect Park Tennis Center at the Parade Ground is a program of the Prospect Park Alliance. Proceeds go toward the ongoing maintenance of the Tennis Center.**



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# Prospect Park Tennis Center Special Aces Junior Development Registration Form 2019-2020

**Ways to return form:****Email:** [pcampbell@prospectpark.org](mailto:pcampbell@prospectpark.org)**Drop off:** 50 Parkside Avenue, Brooklyn, NY 11218**Fax to:** (718) 972-2690**Your Information**Child's Name \_\_\_\_\_  M  F

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Diagnosis \_\_\_\_\_

Emergency Contact Name &amp; Number \_\_\_\_\_

Date of Birth \_\_\_\_\_ School \_\_\_\_\_ Parent/Guardian Name \_\_\_\_\_

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**Preferred Day & Time** (please check your choice) Sunday, 1-2 pm     Sunday, 2-3 pmHow does your child move?     Wheelchair     Walker     Crutches     Walks without assistanceDoes your child have communications needs?     No     If Yes please explain \_\_\_\_\_

How would you describe your child's behavior and social skills? \_\_\_\_\_

Has your child had any prior tennis or other sports experience?     No     Yes, Special Aces for \_\_\_\_\_ yearsDoes your child have special alerts, prescription meds, Seizures, Allergies, etc.?     No     If Yes please explain \_\_\_\_\_

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**Give a Kid the Gift of Game**

Please consider making a charitable contribution with your payment. Your gift will support scholarships for children in the Junior Development Program at the Tennis Center. All contributions are fully tax deductible.

 Yes, I would like to add \$ \_\_\_\_\_ as a contribution to the Junior Development Scholarship Fund.

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**Your Payment Information** (make all checks payable to Prospect Park Alliance Tennis)Payment method:     Check     Cash

Payment \$ \_\_\_\_\_ + Contribution \$ \_\_\_\_\_ = Total \$ \_\_\_\_\_

**Credit card payment policy: Please do not email your credit card numbers to us. If you wish to pay by credit card please contact the Tennis Center by phone or fax and we will put your credit card on file in our protected system or fill out our credit card authorization form.**

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**Waiver and Release from Liability**

The participant (parent/guardian if under 18 years of age) assumes full responsibility for the risk of injury while participating in all activities at the Prospect Park Tennis Center. The participant and their parent/guardian agree to hold harmless, indemnify and release NYC Parks and Recreation, Prospect Park Alliance and the Prospect Park Tennis Center from all liability, loss, cost, claim or damage resulting from participating in any activity at the Prospect Park Tennis Center, and grant permission for the promotional use of photos of participants at the Prospect Park Tennis Center.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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**For Office use only**

Series 1: Cash, Check, Credit Card    Amount \_\_\_\_\_    Day \_\_\_\_\_