

The League Program provides weekly competitive play in both singles and doubles for members at different N.T.R.P. levels.



2018/2019 – League Program

Session 1: August 20, 2018 – January 4, 2019

	Monday	Tuesday	Weds	Thursday	Friday
2.5 Beginner Women					10:30 - 12:00 pm
3.0 B Lower Intermediate Women		10:30 - 12 pm	6:00 - 7:30 pm		10:30 - 12:00 pm
3.0 A Intermediate Women		7:00 - 8:30 pm	9:00 - 10:30 am 6:00 - 7:30 pm	Fixed Partner 10:30 - 12:00 pm	
3.5 Advanced Intermediate Women		7:00 - 8:30 pm		9:00 - 10:30 am	Fixed Partner 9:00 - 10:30 am
4.0 Advanced Women	Fixed Partner 9:00 - 10:30 am			7:30 - 9:00 pm	
4.5 Advanced Competition Women	10:30 am – 12:00 pm				
3.0 A Mens			8:00 - 9:30 pm		
3.5 Men			8:00 - 9:30 pm		
4.0 Men			6:00-7:30 pm		

Weekly Pick up matches, must sign up by 6 pm the day before	Monday	Tuesday	Weds	Thursday	Friday
Night Owl Doubles 4.5 Men				8- 10 pm \$21	
Night Owl Singles 3.5 & Up Men				9 - 11 pm \$21	

For more information about our leagues please contact Michelle Hall MHall@genesishealthclubs.com or Nancy Hougland NHougland@genesishealthclubs.com

League Information:

1. Each participant will receive a copy of the league rules, a league schedule and substitute lists. Each player is responsible for finding their own sub
2. Scores are recorded each week and will be posted.
3. Balls are provided for all leagues.
4. All league sign-ups are subject to approval by the Director of Adult Tennis.
5. NTRP Ratings are used for league placement, evals will be provided for those without an NTRP rating.

FEES	<u>Session 1 (Monday August 13 – Friday January 4, 2019)</u>
Daytime Leagues \$15.00 + tax per week of league play	\$ 300.00
After 6 pm \$17.00 + tax per week of league play	\$ 340.00

Full payment must accompany registration form.

Charge my: Visa MasterCard AMEX Discover House Account
 Account # _____ Exp. _____

Enclosed class fee(s) \$ _____ (Checks payable to Genesis Health Clubs)

1st Choice: League & Level _____ Day _____ Time _____ Fee _____

2nd Choice: League & Level _____ Day _____ Time _____ Fee _____

Name _____

Address _____

City _____ State _____ Zip _____

Contact Phone number: (____) _____

Email Address _____

I would like to be on the sub list for the following doubles leagues:

Signature _____ **Date** _____