



## **2015 After School Program**

**SMASH Table Tennis** After-School Program is now available for children aged 10 and up who wish to participate and learn the sport of Table Tennis. We also offer other activities (Language lessons, Balloon twisting workshops) – see our website for details.

### **Activity**

Group coaching with a SMASH Table Tennis Coach, use of practice facilities, table-tennis robot and a separate room for your child to progress with their homework and study; supervised by a qualified educational specialist. Collection time is 6pm unless by prior arrangement\*.

### **Pricing**

- Initial registration fee of \$100; includes paddle and magnetic bumper sticker; a \$60 value
- \$50/day for members; \$60/day for non-members
- \$200/week for members; \$240/week non-members
- 10% discount for monthly fee paid in advance; 20% discount for full program monthly fee available paid in advance
- See [www.smashtt.com](http://www.smashtt.com) for membership plans and details

### **Transportation**

Transportation is available from your child's school to our facility through our state licensed and insured transportation company partner. Contact us for more information\*\*.

\*Surcharge of \$20/hour applies for late collections

\*\* Additional charges apply







## Waiver

Whereas, Smash Table Tennis, LLC as a service to its members and students, provides after school activities for the students aged 9 and above at 21620 Ridgetop Circle, Suite 190-195, Sterling, VA 20166

Whereas, the undersigned parent or legal guardian of the below named child/children, wishes to take advantage of the after school program designated below;

In consideration for these services, the undersigned parent or legal guardian agrees and represents as follows:

- I am the parent or legal guardian of the below named child/children. I agree to follow all registration requirements.
- I understand that there are certain risks of injury inherent in this after school activity and I am willing to assume these risks on behalf of my child.
- I hereby certify that my child is fully capable of participating in the designated activity and that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation.
- I agree, in taking advantage of this after school activity, to release and hold harmless Smash Table Tennis, including its officers, agents, members and volunteers and any person or persons in charge of running the after school program (the program coordinator), from any and all claims, demands, suits, costs (including attorneys' fees and litigation costs) and charges, in connection with or arising out of the provided after school program, including but not limited to bodily harm or injury to my child/children.
- I understand that this release includes any claims based on negligence, action, or inaction of Smash Table Tennis, LLC and the program coordinator.
- In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize the program coordinator or other adult present to seek immediate medical care at any facility that this person deems most suitable. I further give my consent for any and all emergency medical treatment for my child/children when the child/children is in this individual's care.

I have read this release and further agree that no oral representations, statements, or inducement apart from the foregoing waiver and consent have been made:

**Child Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_