HALL OF FAME SWIM & TENNIS CLUB
SUMMER PROGRAM

Tennis reservations available from 8:00 am to 10:00 pm. Phone 455-7788. Scheduling will be one (1) hour for singles - (2) hours for doubles. Reservations may only be made one (1) day in advance.

The tennis program will be directed by Joe Concialdi and Ross Whittaker.

Private Swim Lessons $30 Hourly. Inquire at front desk.

The pool will be open from 10:00 am until 8:00 pm, Monday - Friday . The pool will close at 6:00 pm on weekends. Holiday hours will be posted at the club prior to each holiday.

All tennis leagues, lessons, and clinics will begin Monday, June 5 and end Saturday, July 29. Swim Lessons will begin Monday, June 12 and end Thursday, July 27. In the event of rain or inclement weather during a scheduled league, lesson, or clinic time, the session will be cancelled. Please call the club to check for cancellations due to weather .

Purchases at the "Courtside Grille" will be on a cash basis only: Visa, Amex and Mastercard accepted.
No food (other than lunches packed from home) permitted on the premises.
No alcoholic beverages are to be brought onto premises. All coolers will be checked at the front desk.

Locker rental is available at the rate of $15.00 small and $25.00 large. (Summer only)

Guest fee: $15.00 adults; $10.00 children (under 18 years of age). Limit five (5) visits per person. Birthday Parties Welcome. Inquire at front desk.

Please carry your membership card and present upon request.

OPENING DATE: Saturday, May 27, 2023
CLOSING DATE: Monday, September 4, 2023

ADDITIONAL FAMILY MEMBER(S) - SWIM AND TENNIS ADD-ON PROGRAM

MEMBERSHIP TYPE	MEMBERSHIP FEE
Children Add-On (Includes Swim & Tennis Lessons)	$250.00
Spouse Add-On	$250.00

Memberships are subject to 6.5% Ohio State Sales Tax

NOTE; FAMILY MEMBERS ARE ALL CHILDREN LIVING AT HOME UNDER THE AGE OF 18 AND CHILDREN WHO ARE FULL TIME STUDENTS. CHILDREN 24 MONTHS AND UNDER AS OF MAY 1, 2023 ARE ADMITTED WITHOUT CHARGE.

2023 SWIM AND TENNIS CLUB ADD-ON MEMBERSHIP APPLICATION

Name (Spouse) _____ Phone _____

Address _____

City _____ State _____ Zip _____

Name _____ Age ____ Name _____ Age ____

Name _____ Age ____ Name _____ Age ____

* List only person (s) covered under membership