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301-519-8580 marylandttc@gmail.com
www.mdttc.com

Maryland Table Tennis Center After School Program

MDTTC will provide a high quality Table Tennis after school program for children age 5 and up.

MDTTC promotes excellence and sportsmanship and provides a safe, clean and friendly environment.

The After School Program includes:

- One Hour Table Tennis Class, instructed by MDTTC coaches; plus practice time
- Tutoring Program, provided by Academic Instructors*
- Courtesy Pick up available in selected areas
- Program ends at 6 p.m.



FEES	MDTTC Members		Non-members	
	1 day per week:	\$ 145 per month	1 day per week:	\$ 175 per month
	2 days per week:	\$ 235 per month	2 days per week:	\$ 275 per month
	3 days per week:	\$ 330 per month	3 days per week:	\$ 375 per month
	4 days per week:	\$ 415 per month	4 days per week:	\$ 475 per month
	5 days per week:	\$ 495 per month	5 days per week:	\$ 575 per month

MULTI-MONTH DISCOUNT: (may combine sibling registrations)

5 % discount for signing up 4 + months at a time; FULL payment required. No refunds for missed days.

Table Tennis Instructors:

MDTTC Coaching Staff: details may be found by visiting www.MDTTC.org

Academic Instructors:

Larry Hodges B.A. in Mathematics, University of Maryland; concentrations in computer science & chemistry

M.A. in Journalism, University of Maryland; concentration in science writing

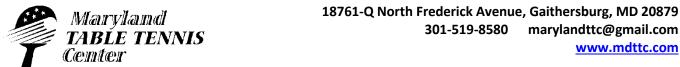
Over 1400 published articles and seven books

Director, Assistant Coach, and Tutor for the Resident Training Program for Table Tennis at the

Olympic Training Center in Colorado Springs (for junior players)

Wen Hsu B.A.'s in Economics & Public Policy from Stanford University

Former Principal & co-founder of Chinese Language School of Connecticut Former English as a Second Language Instructor in France and Taiwan



www.mdttc.com

MDTTC After School Application

Payment is due at time of registration. Please Fill Out Completely and Print Clearly with Ink

Child's Name		Age Present Grade
First Child's Address	LastCity	Zip
Child's Cell Phone	Sex: M	F Birthdate
Name of Child's SchoolAddress		
Address		Time of Dismissal:
Father's Name	Phone:	Email:
Mother's Name	Phone:	Email:
Emergency Contact FULL Name:		Cell Phone:
Health Information: Medication or Food allergies?	·	NO Butterfly
My Child is applying to attend: (minimum ONE	MONTH) Start Date	: End Date:
1 Day per week M T W TH	FRI Monthly I	Fees: Member \$ 145 / Non-Member \$ 175
2 Days per week M T W TH	FRI	Member \$ 235 / Non-Member \$ 275
3 Days per week M T W TH	FRI	Member \$330 / Non-Member \$375
4 Days per week M T W TH	FRI	Member \$415 / Non-Member \$475
5 Days per week Mondays – Fridays		Member \$ 495 / Non-Member \$ 575
PAYMENT: MONTHLY FEE \$	X # MONTH(S)	= TOTAL \$
I give permission for my child to be transported by possibility of another school pick up before returni		the aforementioned school to MDTTC with the
Parent/Guardian Signature	Print N	Date

I hereby assume all risk and responsibility for any and all activities at this club for my child. I release Maryland Table Tennis Center, its owners and staff from any claims for injury or loss suffered due to my child's participation in afterschool activities. I further agree to abide by all rules and decisions of MDTTC.

Parent/Guardian Signature	Print Name	I	Date	