

Application

Please enroll my
Child: _____

Address: _____

In the following program:

Parent's name and contact
number:

Please make checks payable to
Northeast Racquet Club.
Credit cards are accepted at the
club.

For more information, contact
Cliff Raben at
(215) 432-7833



**NORTHEAST
RACQUET CLUB**

Krewstown Rd. and
Grant Ave.
Philadelphia, PA 19115

(215) 671-9220

NORTHEAST JUNIOR TENNIS

Sign up now! Kids Club
Members get **HALF OFF** all
prices!

FALL 2024	
SEP.	OCT.
6 WEEKS	

Cliff Raben
Director

**Join anytime! Amount will
be prorated.**