

Atlanta International Table Tennis Academy

7230 McGinnis Ferry Rd., suite 125 Suwanee, GA 30024

Tel: 6784690650



Group Lesson Student Registration Form

First Name _____

Last Name _____

Address: _____

DOB: _____

Gender: _____

Phone Number: _____

Email: _____

Saturday 1:00pm-3:00pm (), 3:00pm-5:00pm ()

Sunday 1:00pm-3:00pm (), 3:00pm-5:00pm ()

Group lessons has no make up class if you miss the class

I accept full responsibility for participation and relieve Atlanta International Table Tennis Academy, coaches, and practice partners of any liability resulting from injury to myself or my child or damage to my property.

Signature: _____ Date: _____

(Parent or Guardian required to sign for child under 18)