

Summer Tennis Camps

Hosted by Premier Tennis

209•604•BILL (2455)

www.Premier-Tennis.com

(Classes may be combined to meet minimum participation of 6)



Session 1
June 30-July 3

Session 2
July 7-Aug. 4

Monday Evening
1x per wk. 6-8 pm.

Class Name	Time	Description	Ages	Fee's
Pre Red	8:30-9:00	Tiny Tots	4-6	\$ 25.00
Red 1 Red 2	9:00-10:00	New player to the game. Has passed Red 1 competencies	4-6	\$ 55.00
Orange 1 Orange 2	10:00-11:00	New Player to the game. Has passed Orange 1 competencies	7-10	\$ 55.00
Green Yellow	11:00-12:30	Has passed orange 3 competencies Has passed green 3 competes	8-13 11-17	\$ 75.00

Bill Weber	USTA	USPTA
	<ul style="list-style-type: none"> 2011 Warren Brown Service to Junior Tennis Award 2006 NorCal Are League 	<ul style="list-style-type: none"> Coaches Commission 10 & Under Committee Junior Recreation Committee
Coach of the 1st National 10 & Under Player Development Camp held at Stanford		

	Red 1 (Beginner)	Orange 1 (Beginner)	Orange 3 (Advanced)	Green 3 (Advanced)
Forehand Backhand	<ul style="list-style-type: none"> Grip. Eastern to Semi-western Preparation: racquet head above the wrist Swing path: simple loop Ready Position Basic use of split step Square Stance (should be slightly open) 	<ul style="list-style-type: none"> Grip. Eastern to Semi-western Preparation: racquet head above the wrist Swing path: simple loop Ready Position Basic use of split step Square Stance (should be slightly open) 	<ul style="list-style-type: none"> Unit turn: Fuller turn with non-dominant hand staying on the racquet deeper into the turn No head movement 	<ul style="list-style-type: none"> Unit turn: keeping shoulder square through contact Full extension at contact
Move-ment	<ul style="list-style-type: none"> Lateral movement 	<ul style="list-style-type: none"> Lateral movement Forward movement Diagonal forward/backward 	<ul style="list-style-type: none"> Footwork: correct movement forward to execute an approach shot 	<ul style="list-style-type: none"> Footwork: cross-over on balls that are pushing the player back Take the ball on



For Office Use Only:				
Pre Red	Red 1 or 2	Orange 1 or 2	Green	Yellow
Session:	1	2		
Amount Paid:	_____	Cash: _____	Check #: _____	
Initials:	_____			

TENNIS REGISTRATION CONTRACT

SESSION #: (check one): 1 2

CLASS: (Check one): Pre Red Red 1 Red 2 Orange 1 Orange 2 Green Yellow

Please Print

Participant's Name: _____

Home Address: _____ City: _____ Zip: _____

Home Phone Number: _____ Cell Phone Number: _____

Parent or Legal Guardian's Name: _____

May we contact you at work? Yes No Work Phone Number: _____

List any medical/physical condition that your child has that we need to be aware of:

During your child's participation in this activity, will he/she need use of an inhaler or other medically necessary medications? Yes No (If yes, you must fill out a Parental Consent form for Self Administration of Medicine when you register.)

Emergency Contact Name (Other than self): _____ Relation: _____

Home Phone Number: _____ Cell Number: _____

CONSENT OF WAIVER FOR PARTICIPANT: Permission to participate in the above program sponsored by the City of Newman is given for me and/or my minor child. I understand that the City of Newman carries no medical insurance for any of its programs or activities. I hereby agree to indemnify and hold harmless and release the city of Newman and the Newman/Crows Landing School District, its agents and employees, from any risk and all liability for any injury suffered by myself or my minor child rising from or connected with this program and I will assume all risk for any injuries. I understand that a physician's clearance is recommended prior to participation. I hereby authorize Newman Recreation Department or its volunteers to seek medical treatment if my child becomes injured or ill.

I also understand that: NO REFUNDS WILL BE ISSUED.

I understand that there is a \$20 service charge on all returned checks. This fee as well as all original charges must be paid in cash at Newman Youth Center before my child/self will be allowed to participate.

I also understand that I must get my child to class on time and pick them up on time. I understand that this is my responsibility not the instructor's or staff's responsibility.

I agree to conduct myself in a sportsmanlike manner at all times. I understand that this is expected of participants, parents, and other family members or friends and that the Recreation Department staff has the authority to remove anyone violating this stipulation without discussion.

I certify that I have read this contract, understand its provisions, and that the information is accurate.

Parent or Guardian's Signature

Date

Email Address: _____
(Only if you would like to receive information via email about upcoming events or programs.)