

# **Take Your Game** To A New Level

### **Concho Valley Tennis Academy**

In Collaboration with Concho Valley Tennis, the Y aims to teach the lifelong sport of tennis to the San Angelo community. Learn the proper techniques essential for growth in tennis.

#### **Registration Dates:**

March 15 - the first day of camp

#### **Program Fees:**

Members: \$50.00 per week Non-Members: \$65 per week

Receive a \$10 discount per camp if you register for 3+ weeks (Scholarship and discount can not be combined, must register

in-person)

#### **Program Information:**

Ages: 7 - 18 years old Time: 8:00 am - 9:30 am

Week 1: June 3 - 6

Week 2: June 10 - 13

Week 3: June 17 - 20

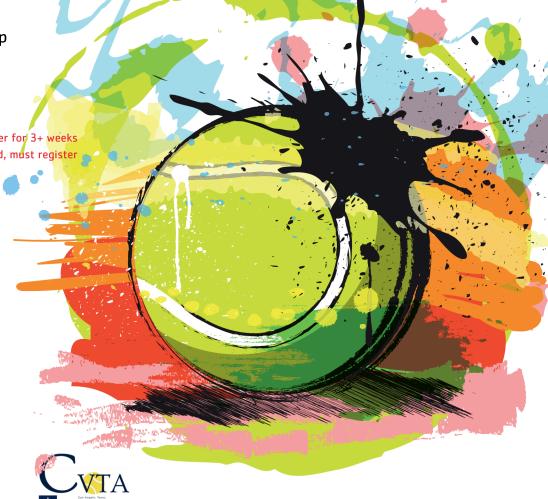
Week 4: July 8 - 11

Week 5: July 15 - 18

Week 6: July 22 - 25

#### Clinics are led by:

Joe Snailum, USPTA Pro with the help of area players and coaches



Financial Assistance Available. Submit your application and receive a response 7 -10 business days later.

All classes will meet at: Concho Valley Tennis Center

1851 Knickerbocker Rd. San Angelo, TX 76904

\*\*Participants are encouraged to bring their own racquet.\*\*





## Summer Tennis Camp 2024 Registration Form

Participant Information	:										
First and Last Name:					DOB:						
Age:	G	ender: F	or M		School:						
Mailing Address:						City:		State: _	Zip Co	ode:	
Additional Information we may	need to kn	ow (cond	ditions, a	allergies	, injuries):_						
Primary Contact Informat	ion:										
First and Last Name:					Relationship:						
					Cell Phone Carrier:						
Primary Contact Email:											
**Com Emergency Contact: First and Last Name:				_		•		please write l	egibly.** 		
Cell Phone Number:					Relationship:						
T-Shirt Size: YS YI (circle one)	er for w			AL	AXL <b>2</b>	3	3	4	5	6	
Receive a \$10 discount per camp if y (Scholarship and discount can not be		r 3+ week	s June	3 - 6	June 10 -	- 13	June 17 - 20	July 8 - 11	July 15 - 18	July 22 - 25	
YMCA MISSION: The mission of youth, to permit them to achiev		_									
WAIVER: I hereby, for myself are its respective officers, agent, so connection with my child's part insurance will be used in the cafollow all policies outlined in the automatically receive marketing time.	ponsors, or icipation in se of an aco e Parent &	any emp the prog cident. B Participa	oloyees f gram. I h y enrolli ant Hand	or any in ereby ac ng/regis Ibook. (C	njury or any knowledge tering my c Can be foun	commu that the hild in th d online	nicable illnes: program pro e program, n at www.ymca	s such as COVID- vides no insurand nyself and my ago asanangelo.org) I	·19 which may b ce coverage, and ents understand understand that	e suffered in I my own and agree to : I will	
PHOTO RELEASE: Additionally, and film footage are often used of San Angelo hereby give my particular control of the Ureproduce, edit, broadcast or roof my experience at YMCA of Swithout any compensation to, a have endorsed any particular control of the	d by the YM permission a nited States ebroadcast an Angelo f and/or claim	CA of Sa nd conse s of Ame any vide or public , by me.	n Angeloent, now rica (YM o film, fo ation, di I may, o	o for pro and for CA of the ootage, s isplay, o r may no	omotional po all time, to ne USA) and soundtrack r exhibition ot be, identi	urposes. the YMO third pa recordin thereof	For my partice  A of San Angries collabor  gs and photo  in promotion	cipation in activit gelo, The Nationa rating with YMCA reproductions o is, advertising, ar	cies to be condu al Council of You of San Angelo t f me/and or my nd legitimate bus	cted by the YMCA ing Men's to make, narrative account siness uses	
REFUNDS: Full refunds will be in be assessed.	ssued only (	ıpon can	cellation	of the	program. Sh	nould a r	efund be requ	uested prior to th	ne first meeting.	A \$10.00 fee wil	
Parent's Signature :						Date:					

Parent's Name Printed: \_\_\_\_\_\_