



TENNIS Camp

Summer 2017

For:
Boys & Girls,
Ages 7 to 18

When:
Monday–Thursday
8:00 to 10:00 AM

Dates:
All Players are welcome to
each week of camp
June 5-8
June 12-15
June 19-22
July 10-13
July 17-20
July 24-27

Venue:
Concho Valley Tennis
Center/Glenn MS,
1902 Knickerbocker Rd, San
Angelo, TX 76901

Cost:
\$35.00 per week
\$30.00 for 3 or more camp
weeks

FMI: YMCA of San Angelo
325-655-9106
Youth Sports Department
Stacy Duffell or Brittney Smith
www.ymcasanangelo.org
sduffell@ymcasanangelo.org
bsmith@ymcasanangelo.org

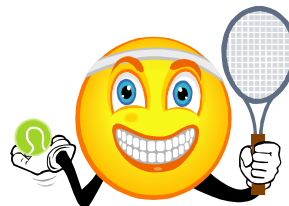


The YMCA and the Concho Valley Tennis Association (CVTA) have partnered up to help grow youth tennis in the Concho Valley. We will be offering four-day camps for players ages 7-18 throughout the summer. Camp coaches include several current collegiate players and USTA members. Proper hitting technique, footwork and coordination, along with strategy and game play will be introduced and incorporated each day. For the younger kids, the Quickstart format will be used that incorporates lower compression balls on smaller courts. They will work on proper use of the equipment while incorporating drills and skills that will help each player grow. Camp will be conducted at the Concho Valley Tennis Association courts at Glenn Middle School. Please bring a racket, hat, sunscreen and water jug. Rackets provided upon request. For more information or questions, please give us a call.

Financial Assistance is available.
See the Welcome Desk at the YMCA for more info.

Registration Deadline will be the Friday, before that week of camp

Now you can register online!
www.ymcasanangelo.org



**San Angelo YMCA and CVTA
Summer Tennis Camps
Registration Form 2017**

Name: _____

Address: _____ Zip: _____

D.O.B: _____ Age: _____ Grade (Fall 2017): _____ School: _____

Primary Contact's NAME: _____

Primary Contact's CELL # _____ Cell Phone Carrier: _____

Primary Contact Email _____

EMERGENCY CONTACT _____

***Include phone number* _____

ADDITIONAL INFORMATION WE MAY NEED TO KNOW (include any allergies, conditions, etc.):

T-Shirt Size YS YM YL AS AM AL AXL

June 5-8 _____

June 12-15 _____

June 19-22 _____

July 10-13 _____

July 17-20 _____

July 24-27 _____

YMCA Mission: The San Angelo YMCA will serve the people in the community of all faiths and ages with emphasis on families and youth, to permit them to achieve their God-given potential in spirit, mind, and body through its programs, staff, facilities, and the community.

WAIVER: I hereby, for myself and my agents, waive and release any and all rights and claims which I may have, or which may accrue against the YMCA of San Angelo and its respective officers, agents, sponsors, or any employees for any injury which may be suffered in connection with my child's participation in this activity. I hereby acknowledge that this program provides no insurance coverage and my own insurance will be used in case of an accident.

By signing this, I am also giving my permission for my child's photo to be taken and used for the promotional purposes of the YMCA.

REFUNDS: Full refunds will be issued only upon cancellation of the program. Should a refund be requested prior to the first game, a \$5.00 service fee will be assessed.

For more information please contact Stacy Duffell or Brittney Smith at 325-655-9106.

Parent Signature: _____ Date: _____

Forms may be mailed to : YMCA YOUTH SPORTS
353 S. Randolph
San Angelo, TX 76903