



Fall 2009

iTennis™ Junior Classes

**November 2nd—December 20th, 2009
7 Week Session**

- Tots** - Players will be taught the fundamentals of tennis using fun drills, tennis related activities and games. The program is designed to help hand-eye coordination and motor skills

- Beginning I** - Players will learn the lines, grips, basic rules of tennis and all the basic strokes. Players with previous experience will continue with basic stroke production

- Beginning II** - Players will continue with basic stroke technique and will begin basic point play and modified rules games. Players should be able to get serves in from baseline with limited success

- Intermediate** - Players should be able to play regular sets and be involved in junior team tennis and/or satellite tournament play. Players will learn advanced shots like angles, topspins, and slices. Introduction to tournaments and good sportsmanship

- Advanced** - Players will learn basic patterns of play and percentage tennis with continued emphasis on proper technique. Players will learn to develop their own style of play & will focus on footwork and conditioning.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Tots (age 3-5)	5:00-5:45 pm					9:15-10:00 am	
Beginning I/II Kids (ages 6-10)	4:00-5:00 pm		4:00-5:00 pm			10:00-11:00 am	
Intermediate Juniors (all ages, must be able to play sets)			5:00-6:30 pm			11:00-12:30 pm	
Advanced Juniors I					4:30-6:00 pm		
Advanced Juniors II	4:30-7:00 pm		4:30-7:00 pm				
Round Robins/ Match Play***					Junior Round Robin 6:00-8:30 pm		

***** Round Robin Prices — \$5.00 Drop-in fee for Junior Round Robin
FREE for all Advanced Junior Clinic Participants**

Advanced Juniors — Middle School 'A' team, High School Junior Varsity, High School Varsity or SCTA ranked.
Must be approved by Director of Tennis.

Clinics may be taken once, twice or three times a week.

Classes are open to the public.

Drop-in Clinics are available, please call for availability & prices.

Refunds & Make-Up Policy

No refunds on clinics. Missed sessions may be made up during the current session provided that 24 hour notice is given that the clinic will be missed. All make-ups must be completed before the end of the session date.



Fall 2009

iTennis™ Junior Classes

November 2nd—December 20th 2009
7 Week Session

	Class Time	Cost	Drop-In
<input type="checkbox"/> Tots	Mon: 5:00-5:45 pm Sat: 9:15-10:00 am	Member: \$12/class Non Member: \$15/class	Drop-In \$18
<input type="checkbox"/> Beginning I/II Kids:	Mon. & Wed: 4:00-5:00 pm Sat: 10:00-11:00 am	Member: \$15/class Non Member: \$18/class	Drop-In \$20
<input type="checkbox"/> Intermediate Juniors:	Wed: 5:00-6:30 pm Sat: 11:00-12:30 pm	Member: \$18/class Non Member: \$23/class	Drop-In \$25
<input type="checkbox"/> Advanced Juniors I:	Fri: 4:30-6:00 pm	Members: \$18/class Non Members: \$23/class	Drop-In \$25
<input type="checkbox"/> Advanced Juniors II:	Mon: 4:30-7:00 pm Wed: 4:30-7:00 pm	Members: \$25/class Non Members: \$30/class	Drop-In \$35

March Play / Round Robin

___ 10% Discount (additional kid)

FREE—iTennis Clinic
Participants

\$5— All others

Total _____

Method of Payment

- Cash
- Check
- Visa
- Mastercard
- American Express
- Discover Card

Parent Name _____

Kid's Name (one per form) _____

Birth date _____

Address _____

Home Phone _____

Cell Phone _____

Email _____

Credit Card # _____

Expiration Date _____

Signature _____

Today's Date _____

Release of Liability & Photo Release

In consideration of the acceptance of my application for iTennis classes, I hereby release and hold harmless iTennis, Inc., its officers, employees, and all independent contractors hired by iTennis to perform tennis instruction for all claims and demands of every kind, nature and character that I may acquire for any and all damages, losses or injuries that may be suffered or sustained by me or my child in connection with tennis instructions. I understand that engaging in tennis instruction can result in a number of possible injuries or medical issues including but not limited to physical injuries caused by stepping on loose balls, being hit by the tennis balls and/or racquets, pulled muscles, strains, and conditions resulting from physical exertion. I certify that I, or my child, have no known medical conditions that might be adversely affected by participation in the clinics. I also agree to iTennis use of my photo or my child's photo for promotional purposes including

I have read, understood, and agree to the above Release of Liability & Photo Release.

Signed _____ Dated _____