



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

BOUNCIN' BACK TENNIS CAMP

2021 FALL TENNIS CAMP

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:

August 18 until September 13

PROGRAM INFORMATION:

Quick-start (7 - 10-year-old)

Every Monday from
September 13 - October 14
Fees: \$35.00

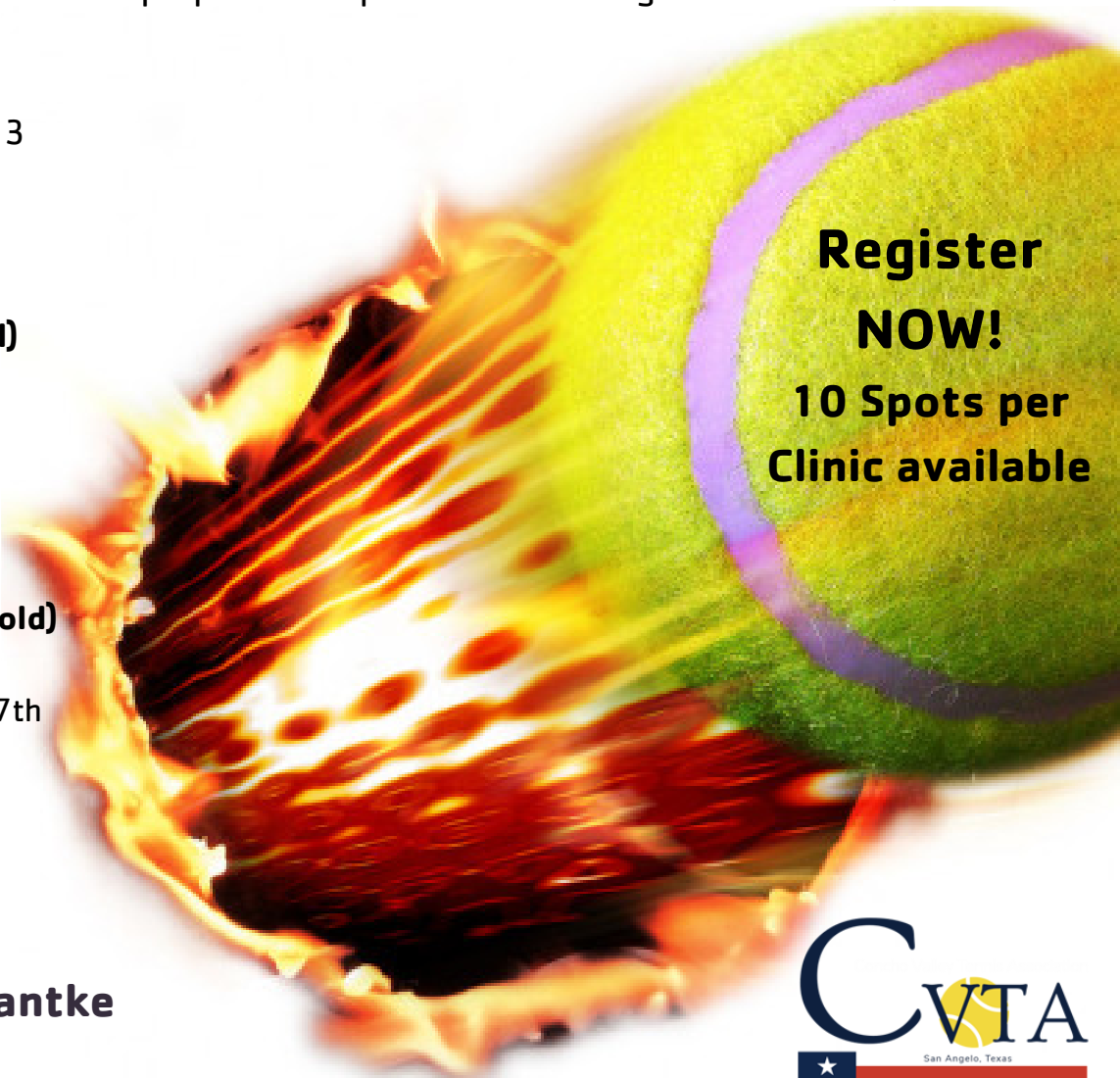
Intermediate (11 - 16-year-old)

Every Tuesday and Thursday
from September 14 - October 7th
Fees: \$75.00

TIME: 6:00 PM - 7:00 PM

Instructor: Jared Ubantke

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



**Register
NOW!
10 Spots per
Clinic available**



All classes will meet at: Concho Valley Tennis Center
1851 Knickerbocker Rd. San Angelo, TX 76904

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

For more information: (325) 655 9106

sduffell@ymcasanangelo.org

www.ymcasanangelo.org

Fall Tennis Camp 2021 Registration Form

Participant Name: _____ DOB: _____

Age: _____ Gender: M or F School: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Primary Contact Name: _____

Cell Phone Number: _____ Cell Phone Carrier: _____

Primary Contact Email: _____

Emergency Contact Name: _____ Cell Phone Number: _____

****Communication done through email to the primary contact, please write legibly. If no email, please put the participants: firstname.lastname@saymca.com****

Quickstart (7 - 10 year old) _____ **Intermediate (11 - 16 year old)** _____

YMCA MISSION: The mission of the San Angelo YMCA is to serve the people on the community of all faiths and ages, with emphasis on families and youth, to permit them to achieve their God-given potential in mind, body, and spirit, 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 may accrue against the YMCA of San Angelo, and its respective officers, agent, sponsors, or any employees for any injury which may be suffered in connection with my child's participation in the program. I hereby acknowledge that the program provides no insurance coverage and my own insurance will be used in the case of an accident. By signing below, I am also giving permission for my child's picture or likeness to be used for promotional purposes of the YMCA Sports Department.

PHOTO RELEASE: Additionally, in consideration of being allowed to participate in YMCA membership and programs, I understand that images, video, and film footage are often used by the YMCA of San Angelo for promotional purposes. For my participation in activities to be conducted by the YMCA of San Angelo hereby give my permission and consent, now and for all time, to the YMCA of San Angelo, The National Council of Young Men's Christian Associations of the United States of America (YMCA of the USA) and third parties collaborating with YMCA of San Angelo to make, reproduce, edit, broadcast or rebroadcast any video film, footage, soundtrack recordings and photo reproductions of me/and or my narrative account of my experience at YMCA of San Angelo for publication, display, or exhibition thereof in promotions, advertising, and legitimate business uses without any compensation to, and/or claim, by me. I may, or may not be, identified in such reproductions; however, I shall not be stated by name to have endorsed any particular commercial products or commercial services.

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

Parent's Signature : _____ **Date:** _____

Parent's Name Printed: _____