



GAME SET MATCH

Monthly Tennis Academy

These classes focus on introducing and improving fundamental skills, including rules, terminology, and technique. Through the progression of skills, participants will learn and practice the skills essential for success in tennis.

PROGRAM INFORMATION:

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

Held weekly on Thursday

Time: 6:00 PM - 7:00 PM

Sessions: (4 sessions each month)

February 1 - February 29, 2024

March 7 - March 28, 2024

April 4 - April 25, 2024

May 2 - May 30, 2024

Fees:

\$40 for Members

\$55 for Non-Members

Intermediate (11 - 16-year-old)

Held weekly on Monday

Time: 6:00 PM - 7:30 PM

Sessions: (4 sessions each month)

February 5 - February 26, 2024

March 4 - March 25, 2024

April 1 - April 29, 2024

May 6 - May 27, 2024

Fees:

\$50 for Members

\$65 for Non-Members

*Cancellations due to weather will be made up based on court availability and weather.

Instructor: Joe Snailum, USPTA Pro

Financial Assistance Available. Submit your application to the Welcome Center or online. Please allow 7 - 10 business days for a response.



All classes will meet at: Concho Valley Tennis Center or ASU Varsity Courts

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

Tennis Lessons – Registration Form

Participant Name: _____ DOB: _____
Age: _____ Grade: _____ Gender: M or F School: _____
Mailing Address: _____ City: _____ State: _____ Zip Code: _____
Primary Contact Name: _____
Cell Phone Number: _____ Cell Phone Carrier: _____
Primary Contact Email: _____

****Communication sent through email to the primary contact, please write legibly.**

Emergency Contact Name: _____ Cell Phone Number: _____

Thursday Quickstart (7 – 10-year-old) _____ Monday Intermediate (11 – 16-year-old) _____

Circle the month you are registering for: **February** **March** **April** **May**

**All classes will meet at: Concho Valley Tennis Center or ASU Varsity Courts
1851 Knickerbocker Rd. San Angelo, TX 76904**

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 or any communicable illness such as COVID-19 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 enrolling/registering my child in the program, myself and my agents understand and agree to follow all policies outlined in the Parent & Participant Handbook. (Can be found online at www.ymcasanangelo.org)

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 \$10.00 fee will be assessed.

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

Parent's Name Printed: _____