

Courtside Girls High School Camps Summer 2010

Courtside's Top Dog and staff, will be hosting a tennis camp specifically for girls that are competing or planning on competing on their High School varsity or junior varsity tennis team.

- The camp will be aggressive and deal with all aspects of match play: mental, tactical and physical
- We will use video analysis to help all players visualize their strokes
- Camps are 5 days; Monday thru Fridays 9am-12
- Back up plans are in place to cover rainy weather (Saturday or Courtside)
- Day visits may be purchased

Cost: \$240 per week OR Day Visit: \$60 per day
 At Warren Hills High School July 26th-July 30th
 At North Hunterdon High School August 2-August 6th
 At Hunterdon Central High School August 9th-13th

Girls do not need to be students at the hosting high school in order to participate in the camp

Registration

Name: _____ Address: _____
 Home Phone # _____ Cell phone# _____
 Emergency # _____ E-mail _____

I would like to attend camp at:

Warren Hills HS _____ North Hunterdon HS _____ Hunterdon Central HS _____
 July 26 to July 30 August 2 to August 6 August 9 to August 13

Amount Enclosed: \$ _____ VIP# _____ or check enclosed _____
 Credit Card: MasterCard _____ Visa _____ American Express _____
 Card # _____
 Signature _____

Release Statement: I, the parent/guardian of the Participant, a minor, hereby agree that the Participant and I will abide by the rules of Courtside Racquet Club, LLC and we hereby release, discharge, and/or otherwise indemnify Courtside Racquet Club, LLC, its owners, officers, employees and instructors against any claim by or on behalf of the Participant or any third party arising out of Participant's involvement in any activities at Courtside Racquet Club. I certify that the Participant is healthy, in sound physical condition and otherwise competent to participate in activities at Courtside Racquet Club. In my absence, I hereby authorize and consent for the Participant to be transported for emergency medical care, if necessary, and for such emergency medical treatment as may be determined to be in participants' best interest by the appropriate medical personnel.

Date: _____
 Print Name: _____ Signature _____



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