



Junior Development Programs Leftwich & Wolbrecht Tennis Centers

Financial Assistance is available for all youth programs. Please contact Melinda Hoehn for details at mhoehn@tennismemphis.org

After-School Program

Session Dates

Session 1: August 13-October 6

Session 2: October 15-December 23

Session 3: January 7-March 10

Session 4: March 18-May 19

Levels

See the player development pathway page and individual level pages for more details. The program is designed for ages 8-18 and players are grouped by skill level. Students must be placed in a level by a coach, unless the student has limited or no tennis experience. The Early Childhood Development Program (ECD) is designed to deliver the program in an age-appropriate way for ages 4-7.

Skill Information (SI), Skill Acquisition (SA), & Early Childhood Development (ECD) ages 4-7

Pricing:

Price per session: 1 day per week: \$90, 2 days per week: \$180, 3 days per week: \$270

Drop-in rate: \$14 per class

Schedule: NOTE ECD is only offered from 4-5 pm at Leftwich

Day of week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Location	WB	LW	WB	LW	WB	WB
Time	4-5 & 5-6	4-5 & 5-6	4-5 & 5-6	4-5 & 5-6	4-5 & 5-6	1:30-2:30 & 2:30-3:30

In Partnership with:





Skill Acquisition Plus (SAP):

Pricing:

Price per session: 1 day per week: \$180, 2 days per week: \$360, 3 days per week: \$540

Drop-in rate: \$28 per class

Schedule:

Day of week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Location	WB & LW	WB	LW & WB	WB	LW	WB
Time	4-6	4-6	4-6	4-6	4-6	2:30-4:30

Competitive Training (CT) & Competitive Training Plus (CT+)

Pricing:

Price per session weekday (M-F): 1 day per week: \$180, 2 days per week: \$360, 3 days per week: \$540; Drop-in rate weekday: \$28 per class

Price per session weekend (Sa, S): \$810

Price per day: prepaid price per Saturday: \$60 full-day; \$30 for ½ day (12-3, or 3-6 only)

Sunday: \$30 per day; Drop-in price for Saturday: \$72 full day; \$36 for ½ day; Drop-in price for Sunday: \$36 per day

Schedule:

Match play & Simulated Drills F, Sa, S

Day of week	Monday	Wednesday	Friday	Saturday	Sunday
Location	LW	LW	LW	LW	ER
Time	4-6	4-6	4-6	12-6	1:30-4:30

Middle/High School:

Pricing: Price per session: 1 day per week: \$180, 2 days per week: \$360, 3 days per week: \$540

Drop-in rate: \$28 per class

Schedule:

Day of week	Tuesday	Thursday	Saturday
Location	WB	WB	WB
Time	4-6	4-6	2:30-4:30

In Partnership with:





Non-traditional Scheduling: 10 month program designed for students who have competitive goals and aspire to play college tennis and beyond. The program runs from August 6 to May 24. Pricing is \$1150 per month. Discounts for students enrolled full-time: Pre-pay for 2 months and receive 10% off. Pre-pay for 3 months and receive 15% off. Sibling discount: 50%.

Schedule:

Day of week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Location	ER + LW	ER	ER + LW	ER	LW	LW	ER
Time	7:30-10 Study Hall 10-3 ER 4-6 LW	7:30-12 Study Hall 12-6	7:30-10 Study Hall 10-3 ER 4-6 LW	7:30-10 Study Hall 10-4	3-7	12-6	1:30-4:30

For more program and registration information you can contact a Tennis Memphis coach, call 901-374-0603, or email tennisoffice@tennismemphis.org www.tennismemphis.org

Policies

Video Policy: ALL STUDENTS in the SA, ECD, & SAP* groups, must have an abbreviated assessment before they may attend the Junior Development Program (complete beginners are exempt.) Students at the CT & CT+ level must have a technical assessment before entering the program. Please see video assessment sheet for details and pricing.

Sibling Discount: 10% for the 2nd child, 25% for the 3rd child, & 50% for 4+ children (not including the first registrant)

Drop-in Policy: Students who are registered for at least one day in a session may attend additional classes at the drop-in rate listed for each class. For weekend classes, please pre-register, and/or email a coach to let them know you'll be attending.

Make-up Policy: Students may make up any classes missed in the session within that same session on a different day. Please inform a coach which day you plan to attend as a makeup day. Missed classes do not carry over from session to session.

In Partnership with:





Registration Information

Players must be placed in a program level by a coach

Circle Program Level: ECD SI SA SAP CT CT+

If attending ECD, SI, or SA, please circle which class you're registering for: 4-5 or 5-6

Center: _____

Circle Day(s) attending: M T W TH F SA S

Payment amount: _____ Payment Type: _____ Discount applied (Y/N)

Full Name of Participant: _____

Date of Birth: _____

School Attending(2018-2019): _____

Parent/Guardian's Name: _____

Relationship: _____

Address: _____

Telephone Number: _____

Email: _____

Emergency Contact: _____

Phone Number: _____

WAIVER, RELEASE & AUTHORIZATION

I, the undersigned parent/guardian, hereby consent for my child to participate in Youth Tennis Clinics. In consideration of participation in the program, I hereby indemnify and hold harmless the City of Memphis, Great Base Tennis, Tennis Memphis and any sponsors of the program and its respective employees, staff, board members, officers, agents, successors. I release the same from any and all liability for any injury or illness which may be suffered by my child arising out of, or in any way connected with the program, and assume the risk for such injury or illness. I, the undersigned, have read this release and understand all of its terms and hereby execute voluntarily, with all knowledge and understanding of its significance. PUBLICITY RELEASE: I hereby give my consent for my child to be interviewed or photographed by the media and Tennis Memphis for purposes of website, social media, marketing, advertising, or newspaper publication. PARENT'S AUTHORIZATION: If I cannot be reached in an emergency, I hereby authorize any medical assistance or treatment deemed necessary in the event of any injury to my child while participating in any program activity. I agree that if my child does not have appropriate insurance coverage, I will pay all costs of medical services incurred on his or her behalf.

Signature of Parent/Guardian: _____

In Partnership with:





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