



Summer Camp 2024
Leftwich Tennis Center
June 3-August 2, 2024

no camp week of July 4th

Red Ball Group Camp

- ages 5-8
 - Classes held on indoor courts
- Monday-Friday 8-9:30am**
Weekly Rate: \$150
Daily Drop in: \$37.50/Day

Orange Ball Group Camp

- ages 6-11
 - Classes held on indoor courts
- Monday-Friday 8-9:30am**
Weekly Rate: \$150
Daily Drop in: \$37.50/day

Green Ball Group Camp

- ages 8-11
 - Classes held on outdoor courts unless raining
- Monday-Friday 9-12pm**
Weekly Rate: \$300
Daily Drop in: \$75/day

Yellow Ball Group

- Ages 10+, Beginner-Advanced Level players
 - Classes held on the outdoor courts unless raining
- Monday-Friday 9-12pm**
Weekly Rate: \$300
Daily Drop in: \$75/day

Competition Group Camp

- Ages 10+, tournament level players
 - Classes held on outdoor courts unless raining
- Monday-Friday 9-12pm**
Weekly Rate: \$300
Daily Drop in: \$75/day

Competition Group afternoon match play session

Monday-Friday 1-2:30pm
Weekly Rate: \$150
Daily Drop in: \$30

Elite Group Camp

**Email Coach Cedric if you would like to register for the
Elite camp at cdezutter@tennismemphis.org**

Leftwich Tennis Center

Summer Camp 2024

REGISTRATION FORM

First Name _____ Last Name _____ Male Female
 Birthdate ____/____/____ Grade in Spring 2024 _____ School _____
 Address _____ City _____ State _____ Zip _____
 Parent/Guardian _____ Cell # _____ Email: _____
 Parent/Guardian _____ Cell # _____ Email: _____
 T-Shirt size YS YM YL AS AM AL

SELECT CAMP

Group	Weeks	Cost
Red Ball Camp	1/2/3/4/5/6/7/8	\$150 X ____ = ____
Orange Ball Camp	1/2/3/4/5/6/7/8	\$150 X ____ = ____
Green Ball Camp	1/2/3/4/5/6/7/8	\$300 X ____ = ____
Yellow Ball Camp	1/2/3/4/5/6/7/8	\$300 X ____ = ____
Competition Camp	1/2/3/4/5/6/7/8	\$300 X ____ = ____
Competition afternoon	1/2/3/4/5/6/7/8	\$150 X ____ = ____

TOTAL PAYMENT \$ _____ Pay at front desk or online <https://tennismemphis.clubautomation.com>

For questions about Leftwich summer camp please contact Coach Cedric at cdezutter@tennismemphis.org

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, 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 _____ Date _____

In order to receive the camp scholarship, please provide proof of government assistance verification letter (food stamps/SNAP, Social Security or disability for self or child.) with this registration form.