

# CAMP SCHEDULE

## THURSDAY

7:30 - 8:00 PM	Check-in
8:00 - 9:30 PM	On-court drills & player evaluation

## FRIDAY

8:15 - 8:30 AM	Dynamic warm-up
8:30 - 9:00 AM	Clinic (serve)
9:00 - 10:00 AM	Station drills
10:00 - 10:15 AM	Break
10:15 - 11:00 AM	Clinic (service return)
11:00 AM - 12:00 PM	Station drills
12:00 - 12:45 PM	Lunch (provided)
12:45 - 1:15 PM	Clinic (forehand and backhand groundstrokes)
1:15 - 2:45 PM	Station drills
2:45 - 3:00 PM	Break
3:00 - 4:30 PM	Singles patterns
4:30 - 5:15 PM	Doubles patterns
5:15 - 6:00 PM	Dinner (provided)
6:00 - 7:00 PM	Nutrition Presentation (Altru Registered Dietician)

## SATURDAY

8:15 - 8:30 AM	Dynamic warm-up
8:30 - 9:00 AM	Clinic (approach shots)
9:00 - 10:00 AM	Station drills
10:00 - 10:15 AM	Break
10:15 - 11:00 AM	Clinic (volley)
11:00 AM - 12:00 PM	Station drills
12:00 - 12:30 PM	Lunch (provided)
12:30 - 3:00 PM	Singles contests/singles or doubles match play
3:00 - 3:30 PM	Camp wrap-up

# CAMP DETAILS

Choice Health & Fitness Youth Tennis Camps are a concentrated group of lessons covering a variety of grips, strokes and strategies, which are time-tested and proven to develop players. The camp is broken into sessions covering primary strokes and techniques which are then reinforced with drills in a fun and informative atmosphere.

**2018 CAMP DATES**  
August 2 - 4

**CAMP COST: \$195**

## AGE/ABILITY REQUIREMENTS

Participants must be entering 7-12th grade in the fall of 2018 & have some competitive tennis experience, such as participation in tournaments or membership on a high school tennis team (Jr. Varsity or Varsity).

## CONTACT

**Lisa Rollefstad**  
Sports & Recreation Manager  
Phone: 701.746.2790  
Email: lrollefstad@choicehf.com

**Tim Wynne**  
Tennis Coordinator  
Phone: 701.746.2790  
Email: tiwynne@choicehf.com

# LIABILITY WAIVER

Participant: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Relation to Participant: \_\_\_\_\_

Cell: \_\_\_\_\_

Home: \_\_\_\_\_

I understand and agree that some activities occurring as part of or incidental to this event may be of hazardous nature and/or include physical or strenuous activity. Understanding this, I state that I have no medical condition or impairment, including the use of medication that might inhibit my active participation in this event.

In case of medical emergency, I authorize the staff or employees of Choice Health & Fitness to render first aid and/or obtain whatever medical treatment he/she deems necessary for my welfare. I further understand and agree that I will be financially responsible for all charges and fees incurred in the rendering of said treatment regardless of whether my medical insurance would cover such charges.

I, hereby, for myself my heirs, executors, and administrators, waive and release only and all my rights and claims for damages I may have against Choice Health & Fitness, the Grand Forks Park District, or their respective agents, representatives, successors and assigns for any and all injuries, which may be suffered by me in connection with my participation in this camp.

I have read, understand and agree to the terms and conditions of this waiver.

I am the parent of legal guardian of the participant (minor) listed above and am signing this waiver on his or her behalf.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

 **CHOICE** HEALTH & FITNESS



# REGISTRATION

## 2018 CHOICE YOUTH TENNIS CAMP

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_

(Participants must be entering 7-12th grade in the fall of 2018)

**Players must have prior competitive tennis experience.**

**TENNIS EXPERIENCE (Check all that apply):**

\_\_\_ High School Team

\_\_\_ USTA Championship Level Tournament(s)

\_\_\_ Other (please describe) \_\_\_\_\_

GRADE ENTERING IN THE FALL: \_\_\_\_\_

GENDER: M F

SHIRT SIZE: YL S M L XL

EMAIL: \_\_\_\_\_

(\*required) \*You will receive confirmation/info via email.

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

**PLEASE ENROLL ME IN THE FOLLOWING CAMP:**

\_\_\_ August 2 - 4      Deadline: July 25

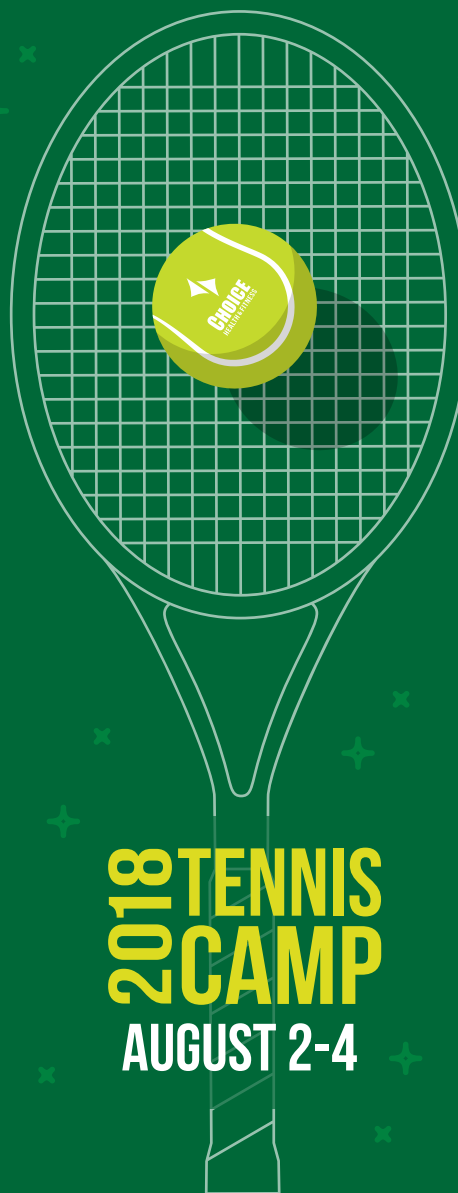
**Camp Cost: \$195 (add \$15 to cost after deadline)**

**MAIL WITH FULL PAYMENT TO:**

Choice Health & Fitness  
Attn: Tennis Camp  
4401 South 11th Street  
Grand Forks, ND 58201



OFFICE USE ONLY: **TENNIS CAMP FEE** | Total Fee \$ \_\_\_\_\_



**2018 TENNIS  
CAMP**  
**AUGUST 2-4**



**TAKE YOUR GAME TO THE  
NEXT LEVEL THIS SUMMER.**

**AUGUST 2-4**

 **CHOICE HEALTH & FITNESS**  
4401 SOUTH 11TH STREET  
GRAND FORKS, ND 58201  
**701.746.2790 | CHOICEHF.COM**

 **CHOICE** HEALTH & FITNESS  
**GRAND FORKS, NORTH DAKOTA**