

2024 FRESNO TENNIS ACADEMY SUMMER TENNIS CAMP

\$55 per day drop-in for members! Non members \$60 \$150 per session for members!

NonMembers:
One time
fee of
\$20 per
family.

CASH OR CHECK ONLY.

IF YOU SIGN UP FOR 2 OR MORE CAMPS (SAME STUDENT) THEN \$140 PER SESSION

10:00am to 11:30am ALL LEVELS WELCOME Ages 5-15

Drop off completed form with payment 2 days before camp to Sierra Sport and Racquet Club Attention: "Teresa"

Session 1: Monday, June 10th - Thursday, June 13th
Session 2: Monday, June 17th - Thursday, June 20rd
Session 3: Monday, June 24th - Thursday, June 27th
No Camp week of 4th

Session 4: Monday, July 8th _ Thursday, July 11th
Session 5: Monday, July 15th _ Thursday, July 18th
Session 6: Monday, July 22th _ Thursday, July 25th
Session 7: Monday, July 29st _ Thursday, August 1st

PeeWees (Ages 2-4): Every Tuesday from 10am-10:30am during Summer Camp Sessions Pre-registration is required 2 days prior the start of the selected camp.

Please notify Teresa in advance for drop ins, and bring form and payment.



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SIGN UP:

Student Name (print)	Age
Parent Name (print)	7.5 9 ()
Cell #	\$55 per day
Email:	drop-in lesson
Membership(circle):	for members!
Member (Tennis family)	Non members
Member (Fitness Family) *Non-Member fee applies	\$60
Non-Member	
Session (circle): 1 2 3 4 5 6 7 OR Drop	o-In Date
Payment method (circle): Cash / Check (make payable	to Sierra Sport & Racquet Club)
If non-member, please add a one time \$20.00 nor	n-member fee Per family
to your payment.	
My son/daughter has my permission to participate in the Fresno Tennis Academ Sport & Racquet Club. With this slip, I hereby release Sierra Sport & Racquet Consupervising, coaching, administering, or assisting the Fresno Tennis Academy "Scharmless for any injury, loss, or liability that may arise with instructors/coaches, program.	lub and staff, including any person Summer Tennis Camp" and hold
Parent/Guardian Signature	
Date	
Contact	

Contact:

COACH TERESA 559-259-8189 COACH

FRANCISCO 559-916-4245

COACH CHRIS 864-640-7382

Staff Use Only: CASH CHECK	TOTAL AMOUNT:	SERVICE FORM
Notes:	Staff Name:	Z