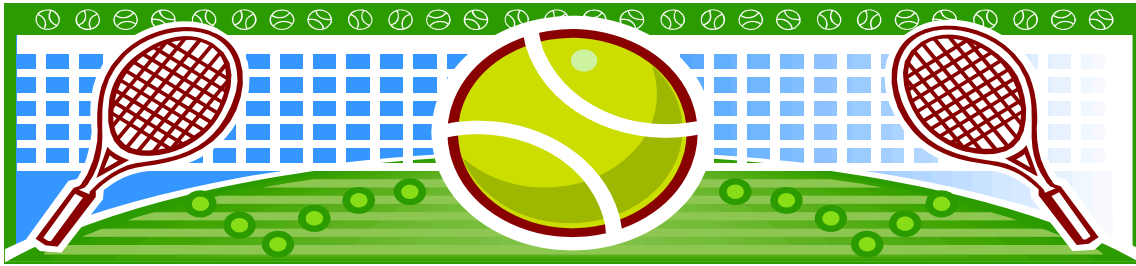


# CHARLESTON TENNIS CENTER

## FALL JUNIOR PROGRAM 2010



Having fun while learning the game of tennis!

Session 1: Aug 23 – Sept 17

Session 2: Sept 20– Oct 15

Session 3: Oct 18 – Nov 12

Session 4: Nov 15 – Dec 10

### **ACES** Ages 3-5 years

The Aces will be using the **Quickstart Program**. The latest teaching method to get young children introduced to the game of tennis. We playfully teach your child good balance, throwing, catching, hand-eye coordination, & footwork. We use many different games to keep it interesting to your child.

**Tuesday** 4:15- 5:00 pm \$40 per session/once a week

**Thursday** 4:15- 5:00 pm \$75 per session/twice a week

### **SMASHERS** Ages 6-7 years

The Smashers will be using the **Quickstart Program**. The latest teaching method to get young children introduced to the game of tennis. This program is tailored to teach and develop basic physical and mechanical abilities using many different games to keep it fun and interesting.

**Tuesday** 5:00 - 5:45 pm \$40 per session/once a week

**Thursday** 5:00 – 5:45 pm \$75 per session/twice a week

### **HOT SHOTS** Ages 8-10 years

Hot Shots is designed for juniors seeking to learn the proper grips and techniques in a fun and positive environment. Forehand, backhand, serve and volley will be introduced.

**Monday** 4:30 - 5:30 pm \$50 per session/once a week

### **RISING STARS** Ages 10-14 years

Rising Stars is designed for juniors seeking to further improve their techniques and introduction to match-play.

**Wednesday** 4:30 - 5:30 pm \$50 per session/once a week

### **JUNIOR FUTURE STARS PROGRAM** Ages 10-18 years

This clinic is designed for the serious junior player. Program includes professional instruction, match-play, strategy and conditioning. Program is designed to prepare juniors for high-level tournament tennis.

**Tuesday & Thursday Time: 4:30-6:00 pm**

\$75 per session/once a week \$140 per session/twice a week

Last Name.....First Name .....Age.....

Program.....Days/Times.....

Parents Names.....

Address, Zip code, City.....

Home Phone.....Work Phone.....

Cell Phone.....E-Mail.....

Child's Medical Information.....

Mail to: Attn: Head Pro  
Charleston Tennis Center  
19 Farmfield Avenue  
Charleston, SC 29407

Make checks payable to:  
**The City of Charleston**

Tuition Enclosed: \$\_\_\_\_\_

Payment will be made before the  
First class (please circle)

Balance is due with the registration form or before the first class. Fees are not refundable once the class has begun. Classes will be rescheduled if it rains.

In consideration of my entry, I hereby covenant not to sue and will release and forever discharge the City of Charleston, and any employee of all claims, demands, right and causes of action of what ever kind, foreseen or unforeseen for bodily and personal injury, resulting from my participation.

Signature\_\_\_\_\_Date\_\_\_\_\_



**CHARLESTON TENNIS CENTER (766-7401)**  
**HEAD PRO FREDRIK ANDERSSON (442-5472)**