

## Weekend Adult Tennis Camp

### Sunday, July 15

**Full day: 8:50 a.m. – 5:00 p.m. — \$200**

**Half-a-day morning: 8:50 a.m. – 12:30 p.m. — \$120**

Advance registration is required. Same-day registration will be \$220 (Full day) and \$140 (AM) if available

#### Sample Schedule

8:50 a.m.	Check-in
9:00 a.m. – 11:15 a.m.	Warm-up, Evaluation/On-court instruction, drills
11:20 a.m. – 11:50 a.m.	Specialty course #1 (Serve, Volley, Overhead, Top-Spin, etc.) with demo.
12:00 noon	Lunch break – Lunch provided
12:30 p.m.	End of Lunch time

----- End of half-a-day morning camp -----

12:50 p.m.	Back on court
1:00 p.m. – 1:30 p.m.	Specialty course #2 (Serve, Volley, Overhead, Top-Spin, etc.)
1:30 p.m. – 2:15 p.m.	On-court warm-up/drills/Zone
2:20 p.m. – 3:45 p.m.	Mix and match Team Tennis
3:50 p.m. – 4:00 p.m.	Challenge our pros/Raffle
4:00 p.m. – 5:00 p.m.	Free play

#### The camp includes:

- ✓ Full day (or half-a-day) of on-court instruction with USPTA and PTR-certified teaching professionals
- ✓ Lunch and a tennis camp T-shirt
- ✓ Specialty shots
- ✓ Cardio/ZONE Tennis sampling
- ✓ Challenge our pros
- ✓ Raffles

#### Registration:

Register online at [www.ntc.usta.com](http://www.ntc.usta.com) or

Fill out registration form and mail it with your payment to:

USTA Billie Jean King National Tennis Center  
Attn: 2018 Adult Tennis Camp  
Flushing Meadows Corona Park  
Flushing, NY 11368



We accept VISA, MasterCard, Amex or DISCOVER.

#### Cancellation policy:

Please submit cancellation request in writing at least 10 days prior to the Camp date. The refund will be the full amount less a \$50 administrative fee. Sorry, no refunds for notices received less than 10 days prior to Camp date or for any unused portion of the Camp.



# 2018 SUMMER

Flushing Meadows Corona Park  
Flushing, NY 11368  
(718) 760-6200

[WWW.NTC.USTA.COM](http://WWW.NTC.USTA.COM)

## Weekend Adult Tennis Camp Registration form

**Sunday, July 15** (Please select one)

- 8:45 a.m. – 5:00 p.m. — \$200 (Full day)
- 8:45 a.m. – 12:00 p.m. — \$120 (Half-a-day morning)

Mail the form with full payment to:  
USTA Billie Jean King National Tennis Center  
Attn: 2018 Adult Tennis Camp  
Flushing Meadows Corona Park, Flushing, NY 11368

Or register online at [www.ntc.usta.com](http://www.ntc.usta.com)

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We accept VISA, MasterCard, Amex or DISCOVER.

First Name: \_\_\_\_\_ Last Name \_\_\_\_\_ M or F \_\_\_\_\_ D.O.B \_\_\_\_\_

Address \_\_\_\_\_  
Street Apt. #

\_\_\_\_\_ City State Zip

E-mail \_\_\_\_\_

Home Number ( ) \_\_\_\_\_ Cell/Business Number ( ) \_\_\_\_\_

NTRP/NTC rating: \_\_\_ Beginner/Level 1 \_\_\_ Level 2 \_\_\_ Level 3 \_\_\_ 3.0 \_\_\_ 3.5 \_\_\_ 4.0 \_\_\_ 4.5 +

### Waiver of claims:

In consideration of his/her participation in an USTA NTC program, Participant hereby acknowledges and knowingly and voluntarily assumes any and all risks of personal injury or property damages which might be associated with tennis, sports conditioning and fitness-related activities. Participant certifies he/she is in good physical condition, sufficient to use the facilities and participate in the program. Participant, on behalf of him/herself, his/her heirs and anyone acting on Participant's behalf, releases, discharges and holds harmless the USTA NTC, USTA, City of New York and their respective officers, directors, employees and representatives (collectively, "Releasees") from and against any and all claims arising, directly or indirectly, in connection with Participant's participation in the program or any event related thereto from any cause whatsoever, regardless of whether caused by the negligence of the Releasees (the "Released Claims"). Participant, on behalf of him/herself, his/her heirs and anyone acting on Participant's behalf, covenants and agrees not to bring or be a party to any legal action or claim against the Releasees from any reason based on any of the Released Claims. Participant agrees that USTA NTC and its designees may use Participant's name, voice, photographs, likenesses, biographies, testimonials and statements, and other identification for any purpose relating to USTA NTC activities and advertising and publicizing the USTA NTC and its products and services.

Amount: \$ _____	<input type="checkbox"/> Cash: Walk-in only
<input type="checkbox"/> AX	<input type="checkbox"/> VISA
<input type="checkbox"/> MC	<input type="checkbox"/> DISCOVER
Exp. Date ____/____	
Card Number _____	
Card holder's Name (Printed) _____	
Card holder's Signature _____	
<b>Accounting Dept. use only</b>	
TS # _____	Date Processed: _____
Notes: _____	

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

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