Wimbledon 109 Tennis Club
20 COUNTY STREET
WALPOLE, MA 02081

Summer Camp Application 2010

Hilary Ryan McCarthy, Director
Phone: 508-668-7109

SUMMER CAMP 2010: This eight (8) week program is offered to children between the ages of 7 and 16 at all ability levels. The Camp will meet daily, Monday through Friday, 8:30am - 12:30pm. Campers will have a mid-morning break with a snack and drink. All campers will receive a Wimbledon 109 T-shirt.

PROGRAM: All aspects of the game will be covered, including stroke production, score keeping, strategy and match play. All campers will be given an opportunity to participate in matches and round robins. There will be fun games, drills and awards at the end of the week.

EXTENDED DAY: Children nine (9) years and older have the option of staying until 3:00 pm on Tuesday, Wednesday and Thursday. Lunch will be provided. We will focus on match play, tactics and strategy. Campers will learn the basics of how to play doubles and singles.

WEEKS:

#1	**July 6-July 9*** (Mini Camp)	#5	**August 2-August 6**
#2	**July 12-July 16**	#6	**August 9-August 13**
#3	**July 19-July 23**	#7	**August 16-August 20**
#4	**July 26-July 30**	#8	**August 23-August 27**

**Mini Camp fee*: $208, for four days

COST: $260 per week, per camper; $225 if full payment is received by May 15, 2010. Mini Camp, July 6-July 9, is $208. Extended day is an additional $125 per week per camper, or $42/day. Payment must accompany registration. A $25 charge will be assessed for any cancellation prior to June 11. **No refunds or credits will be given for cancellations after June11.**

TO ENROLL: Please complete and return only the form below, with payment to:
Wimbledon 109 Tennis Club, 20 County Street, Walpole, MA 02081 (Make checks payable to Wimbledon 109.)

--- (Turn this portion in to Wimbledon 109; keep the top for your records.)

WIMBLEDON 109 SUMMER TENNIS CAMP - 2010

CAMP WEEKS	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**
EXTENDED DAY (Tues., Wed., Thurs., 12:30-3:00)	**1****	**2**	**3**	**4**	**5**	**6**	**7**	**8**

(Please circle week or weeks you will attend Camp or Camp & Extended Day.)

**Week 1 has only two Extended Days, Wednesday and Thursday.

Name:_____ Age: _____ DOB: _____

Street: _____ Town: _____ ZIP: _____

Level: _____ Home Phone: _____ Check here if your address or phone has changed: ☐

PARENT'S NAME: _____

EMERGENCY CONTACT_____ Relationship: _____Phone: _____
__(Other than parents)

Please do not write below this line

Amount: Date: Receipt #: