

## **2020** JUNIOR DEVELOPMENT PROGRAM Winter 2: January 6<sup>th</sup> – February 15<sup>th</sup>, 2020

<u>NO CLINIC Saturday January 18<sup>th</sup> – L4 USTA MV B18 #1</u> <u>NO CLINIC Saturday February 15<sup>th</sup> – L4 USTA MV B18 #2</u>

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Pee Wee (Ages 4-7) – Red For the youngest tennis players ! Shorter rackets, smaller court, shorter nets, and softer balls to learn the basics of tennis and improve quickly. Cooperation, movement and fun included !						1000-1100	
Hot Shots(Ages 6-9) – Orange Program designed the get young players to rally and play points. Emphasis on basic fundamental stroke, technique and court positioning.		4:30-5:30				11:00-12:00	
Aces (Ages 8-11) – Green Designed to keep working and improving on stroke mechanics and court positioning. Serve consistency and point play development. Use of competitive game to simulate real match situations				4:30-5:30		12:00-1:00	
Team Challenges Introduction to tennis competition offering low-pressure team environment for children of all ages to develop their skills through level-based play, without an emphasis on instruction or results.							
Team Tournament Innovative way for children to enjoy tennis competition in a low-pressure team environment. This experience will encourage players of all ages to gain match experience, develop their skills through level-based play, and demonstrate good sportsmanship.							
<b>Smashers</b> Tournaments for Orange and Green ball levels around Nebraska. Registration is to be done through the USTA tennis link website.							

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## 6 Week Session

a weak Badhall \$102 1x a weak Orange/Crean Ball \$169 2x a weak 1 Hour M **1 Hour No** 

Non-Member \$22 \$110– 1x a week <u>Redball</u> \$132 – 1x a week <u>Orange/Green Ball</u> Ion-Member \$22 \$110– 1x a week <u>Redball</u> \$132 – 1x a week <u>Orange/Green B</u>	NN/pagpiba@goposishoalthclubs.com			
Full payment must accompany registration form. You may bring payment the first	day of clinics. Scott Slezak (Tennis Pro) – Cell# 402-740-32			
Charge my:  Visa MasterCard Mathematical AMEX Discover House	Account Nico Arguello (Tennis Pro) – Cell# 402-657-79			
Account #	Exp			
Enclosed class fee(s) \$	(Checks payable to Genesis Health Clubs)			
Student's Name	_Birthday			
Parent's Name	Parent's Email (Required)			
Contact Phone	ADDRESS:			

Please list any dates that your child will miss, that you know of in advance

## Payment, membership, enrollment, refund and make-up policies:

Full payment must be included with the registration form at the beginning of session for ALL DAYS that you plan on your child being there! If you 1. come to more classes than you signed up for, we will send you a separate invoice for those additional classes. A student enrolling after the start of a session who is unable to make-up missed classes will be charged a pro-rated fee for the remainder of the session. Fee is non-refundable except as follows:

 For medical disabilities, a pro-rated refund/credit shall be given from the date the refund is requested when accompanied by a doctor's statement explaining the nature of the disability or injury and duration.

- A student who does not meet the skill level requirements will be asked to change to a compatible class or will be issued a pro-rated refund or credit.
- If any class is cancelled, Genesis shall make every make every effort to reschedule the class on a date agreeable to all students. If the class cannot be rescheduled, each participant shall be given a refund or credit for the cancelled class.
- Only the Director of tennis may approve lesson refunds, credits or pro-rated fees.
- 2. A student is allowed to make-up one class per current session. To assure your class make-up, please provide five days advance notice. To request a make-up, please contact the Director of Tennis, Josh Raymond. Make-ups are not offered in the first week of a session. Make-ups do not carry over to the next session. If you schedule a make-up and need to cancel, please contact us 24 hours in advance of the scheduled make-up.
- 3. Non-Members: I accept full responsibility for me and/or my child/children's use of any and all apparatus, appliances, facility privilege or service whatsoever, owned and operated by this Club at my own risk and shall hold this Club, its shareholders, directors, officers, employees, representatives, and agents harmless from any and all loss, claim, injury, damage or liability sustained or incurred by me or my child/children resulting therefrom.

Parent's Signature	Date
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