

SPORTIME SCHENECTADY 2020 SHENENDEHOWA TENNIS CAMP

BEGINNER ● INTERMEDIATE ● HIGH SCHOOL - VARSITY/JV

JUNE 29 - JULY 30

Shenendehowa Summer Adventure presented by SPORTIME

Shenendehowa Community Education, in conjunction with SPORTIME, is offering Summer 2020 tennis camp programs for junior players ages 10 to 17. The programs will be co-directed by Bill MacArthur, Shenendehowa Varsity Tennis Coach and Philippe Ceas, Director of Tennis at SPORTIME Schenectady for the past 12 years.

The Shen program promises to provide a fun and highly beneficial experience for young players of all levels and needs. For a listing of days and times by level, please see the application.

**Camp is located at Shenendehowa School District High School East:
970 Route 146, Clifton Park, NY 12065**

Students Need to Bring

1. Properly sized tennis racket (SPORTIME will have loaner/demo rackets on-site)
2. Comfortable athletic clothing and footwear appropriate for tennis
3. Water and a light snack

Staff

SPORTIME/Shen Coaches will be highly trained, certified tennis professionals.

Safety

All of our activities will be designed to ensure fun and learning, with safety our highest priority. Our directors are First Aid, CPR-Certified. We will have basic first-aid medical supplies, an AED and cell phones on-site at all times in case of emergencies.

Rain Day and Make-Up Policy

Students can make up camp days missed due to inclement weather by attending any other day that camp is in session through the five-week program period. High school evening classes will be notified by 2:00pm if camp is moving indoors to SPORTIME Schenectady or reschedule for Friday.

To Enroll

Please complete the application and send it, along with payment in full, and your child's school health form (medical release, physician's report, etc.) to:

SPORTIME Schenectady
Shenendehowa Tennis Camp
2699 Curry Rd., Schenectady, NY 12303

Register Today!

Enrollment is limited and spaces will be reserved on a first-come-first-served basis, upon receipt by SPORTIME of a completed application and payment in full. There are no refunds after June 1, 2020. For more information, call Tennis Camp Director Bill MacArthur or SPORTIME Director of Tennis Philippe Ceas at 518-356-0100 or pceas@sportimeny.com.



Shenendehowa Tennis Camp at SPORTIME Schenectady
2699 Curry Road, Schenectady, NY 12303

518-356-0100

www.SportimeNY.com/SCH

In order for this application to be processed, please complete all required information and return with required deposit. Please print clearly.

Camper Information

GENDER MALE FEMALE

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Camper First Name	Camper Last Name	Nickname	Date of Birth	Grade and School Attending September 2020
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address	Address 2	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Parent/Guardian 1 First Name	Last Name	Mobile Number	Email Address (Required)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Parent/Guardian 2 First Name	Last Name	Mobile Number	Email Address (Required)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Home Phone	Emergency Contact First Name	Emergency Contact Last Name	Relation to Camper	Emergency Contact Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Health / Allergy Restrictions				
How did you hear about our camp? <input type="checkbox"/> Word of Mouth <input type="checkbox"/> Mail <input type="checkbox"/> Web <input type="checkbox"/> Social Media _____ <input type="checkbox"/> Ad _____ <input type="checkbox"/> Referral, who can we thank? _____				

Camp Information Costs listed are per week.

CAMP PROGRAM	AGES	START TIME	END TIME	COST
<input type="checkbox"/> BEGINNER INTERMEDIATE WEEKLY	10-17	9:00AM	10:30AM	\$99.00
<input type="checkbox"/> HIGH SCHOOL - VARSITY/JUNIOR VARSITY AM SESSION	12-17	10:30AM	12:00PM	\$99.00
<input type="checkbox"/> HIGH SCHOOL - VARSITY/JUNIOR VARSITY PM SESSION	12-17	4:00PM	6:00PM	\$119.00

Schedule Selection Please check all programs and weeks that apply. Changes may be made until June 1st. All changes after will be subject to availability.

CAMP WEEK

Week 1: June 29 - July 2 ***All camps are Monday to Thursday.**

Week 2: July 6 - July 9

Week 3: July 13 - July 16 Parent's/Guardian's Initials: _____

Week 4: July 20 - July 23

Week 5: July 27 - July 30

Camp Location

Shenendehowa School District High School East:
 970 Route 146, Clifton Park, NY 12065

CAMP LIABILITY WAIVER, ASSUMPTION OF RISK AND RELEASE AND OTHER TERMS: By signing below I agree that I am the parent or legal guardian of the above-named camper and hereby give permission for him/her to participate in the SPORTIME Camp Program. We agree to abide by all program and other club rules and regulations, which now exist or which may be hereafter adopted or amended by SPORTIME Clubs, LLC ("SPORTIME"), including providing SPORTIME with medical forms and records of immunization upon request. I further acknowledge and agree that there are certain inherent dangers in participating in tennis, sports and other camp activities, and that SPORTIME shall not be liable for any personal injuries, property theft or damage, or other loss sustained by my child, off, on or about the premises of SPORTIME, or arising out of the use of any facilities, equipment or other property of SPORTIME. I hereby further declare my child to be physically sound and suffering from no conditions, impairment, disease, infirmity or other illness that would prevent his/her participation in SPORTIME camp programs, services and activities. In case of accident or injury to my child, and if an emergency contact person cannot be reached, I grant SPORTIME permission to obtain medical attention for my child, if necessary, for which I will be financially responsible. SPORTIME reserves the right to cancel this contract at any time, at its sole discretion; in such event SPORTIME's sole liability shall be a refund for unused camp days. I understand and agree that SPORTIME retains the rights to any photographs or video taken of the named participant at SPORTIME facilities or at off-site SPORTIME programs or events, to be used for SPORTIME publicity, marketing, social media and advertising. SPORTIME's Privacy Policy can be viewed at: https://www.sportimery.com/privacy_policy.php. If the named participant's email address is provided above, I authorize SPORTIME to contact him/her at such address directly. SPORTIME DOES NOT GUARANTEE MAKE-UPS FOR CLASSES MISSED BY THE PARTICIPANT.

Cost Recap

ITEM	# OF WEEKS	TOTAL
CAMP COST	_____	\$ _____
TOTAL		\$ _____
SIBLING DISCOUNT: 5% for 2nd Child		-\$ _____
BALANCE DUE IN FULL BY JUNE 1, 2020		\$ _____

Payment Information AMOUNT IS: \$ _____ DEPOSIT PAYMENT IN FULL

PAYMENT INFORMATION: Enrollment is limited. Spaces are reserved on a first-come, first-served basis upon receipt of a completed application and payment in full. Any request for a refund of camp tuition must be received prior to June 1, 2020. No refunds will be given after June 1, 2020. There are no "make-ups" for absences and unused camp days/time will not be credited or refunded.

PAYMENT METHOD:

CHECK CASH CHARGE TO MY ACCOUNT: I authorize you to bill my credit card on file.

CREDIT CARD: MC Visa AMEX

<input type="text"/>	<input type="text"/>
CREDIT CARD NUMBER	EXP.
<input type="text"/>	<input type="text"/>
PARENT / GUARDIAN SIGNATURE	DATE

<input type="text"/>	<input type="text"/>
PARENT / GUARDIAN SIGNATURE	DATE

Enroll Today! Complete this application and return with the required deposit by mail or fax:

Mail: Shenendehowa Summer Adventure, SPORTIME Schenectady, 2699 Curry Road, Schenectady, NY 12303 / Fax: 518-356-4797
 Please contact us at 518-356-0100 or email pceas@sportimery.com with any questions.