



SPORTIME SCHENECTADY
2699 Curry Road, Schenectady, NY 12303
P. 518.356.0100 F. 518.356.4797

Shenendehowa School District
High School East
970 Rte 146
Clifton Park NY 12065

ALL CAMPS ARE HELD AT SHENENDEHOWA HIGH SCHOOL EAST TENNIS COURTS

Shenendehowa Summer Adventure 2018

presented by **SPORTIME**

Shenendehowa Community Education, in conjunction with SPORTIME, is offering a tennis camp for junior players 5-18 years old. The camps will be under the direction of Mr. Bill MacArthur, Shenendehowa Varsity Tennis Coach. Mr. MacArthur has taught at Shen for 48 years and been involved in tennis camps for the past 44 years.

This camp promises to provide a fun and highly beneficial experience for the beginner to the experienced varsity player! Tennis players ages 5 to 18 are sure to find a time and offering that works for them!

SEE REVERSE SIDE OF THIS PAGE FOR TIMES, PRICES AND APPLICATION TO ENROLL

Camp Questions? Contact Coach MacArthur at 391-0303, or 877-5802, or billmacarthur@yahoo.com

Student Needs

1. Tennis Racquet (SPORTIME will have racquets on site for use)
2. Proper clothing and footwear for physical activity, specifically for tennis
3. Water and a light snack

Staff

SPORTIME/'Shen' Staff will be highly trained, certified tennis professionals. The director has been an educator, coach, and tennis pro his entire career.

Safety

All of our activities will be time tested to ensure the best results, with safety as our highest priority. Our director is 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 six-week period. Make-up days for rain on Fridays.

High school evening classes will be notified by 2:00pm of that day if camp is moving indoors to SPORTIME Schenectady.

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
2699 Curry Rd., Schenectady, NY 12303

Please note that there are no refunds after June 1, 2018.

Enrollment is limited and spaces will be reserved on a first-come-first-served basis, upon receipt by SPORTIME of completed application and payment in full. There are no refunds after June 1, 2018. For more information, call Tennis Camp Director Bill MacArthur or SPORTIME General Manager Jed Murray at 356-0100.

CAMPER INFORMATION Please print clearly and legibly.

| | | | |
|--|---|--|-----------------|
| CAMPER FIRST NAME | | CAMPER LAST NAME | |
| DATE OF BIRTH | GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE | ALLERGIES / HEALTH RESTRICTIONS (IF ANY) | |
| PARENT / GUARDIAN FIRST NAME | | PARENT / GUARDIAN LAST NAME | |
| PARENT/GUARDIAN EMAIL ADDRESS (REQUIRED) | | | |
| STREET ADDRESS | | CITY | STATE ZIP |
| HOME PHONE | BUSINESS PHONE | CELL PHONE | |
| EMERGENCY CONTACT NAME | | RELATION TO PLAYER | EMERGENCY PHONE |
| HOW DID YOU HEAR ABOUT US? <input type="checkbox"/> WORD OF MOUTH <input type="checkbox"/> MAIL <input type="checkbox"/> WEB <input type="checkbox"/> SOCIAL MEDIA <input type="checkbox"/> REFERRAL | | | |

CAMP SELECTION

All camps are held at Shenendehowa High School East tennis courts. In the event of rain, high school will be notified by 2:00pm if camp will be moved to SPORTIME:

| WEEK | BEGINNER Age 5-10: 9-10:30 am | BEGINNER INTERMEDIATE Age 11-18: 10:30-12pm | Please note: Rain Day Make ups: Fridays. High School Evening classes notified by 11am if indoors at SPORTIME. |
|--------------------------------|---|--|--|
| Week 1: June 25 - June 29 | <input type="checkbox"/> \$99 | <input type="checkbox"/> \$99 | |
| Week 2: July 9 - July 13 | <input type="checkbox"/> \$89 | <input type="checkbox"/> \$99 | |
| Week 3: July 16 - July 20 | <input type="checkbox"/> \$99 | <input type="checkbox"/> \$99 | |
| Week 4: July 23 - July 27 | <input type="checkbox"/> \$99 | <input type="checkbox"/> \$99 | |
| Week 5: July 30 - Aug 3 | <input type="checkbox"/> \$99 | <input type="checkbox"/> \$99 | |
| SESSIONS | | | |
| (2-week sessions) | HIGH SCHOOL SESSIONS - VARSITY AND JUNIOR VARSITY COMBINED | | |
| SESSION 1 - July 9- July 19 | Mon/Tue/Wed/Thu 9:00-10:30AM | Mon/Tue/Wed/Thu 4:00-6:00PM | |
| SESSION 2 - July 23 - August 2 | <input type="checkbox"/> \$119 | <input type="checkbox"/> \$159 | |
| | <input type="checkbox"/> \$119 | <input type="checkbox"/> \$159 | |

ADDITIONAL FORMS NEEDED TO COMPLETE THIS APPLICATION

The following forms are available on the website: www.sportimemy.com/schenectady. Click on "Camps" in the 'Jump To' box.

- Sunscreen Permission Form
 Parental Agreement
 *Health Certificate/Appraisal *(NYS form)
 Consent for Treatment
 *Immunization Record

*These forms must be completed by the camper's physician and must be from 2018.

REGISTRATION AND PAYMENT INFORMATION

| | | |
|---|-----------------|--|
| REQUIRED: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> AMEX | Expiration Date | Please note: Payment in full is required upon registration. No refunds will be given after June 1, 2018 |
| <input type="checkbox"/> Please charge the credit card listed above for the full cost of the program. <input type="checkbox"/> Check Payment enclosed for the full cost of the program. | | |

PAYMENT TERMS, LIABILITY WAIVER AND ASSUMPTION OF RISK AND RELEASE

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. SPORTIME retains the rights to any photographs or video taken in the context of the program to be used for publicity or advertising. **I understand that a valid credit card must be supplied on this application in order for a camp space to be reserved.**

PARENT'S/GUARDIAN'S SIGNATURE _____ DATE _____ STAFF SIGNATURE _____ DATE _____

Please mail completed application with payment in full to: SPORTIME Schenectady, 2699 Curry Rd., Schenectady NY 12303