

Photo Release: I give permission for my child to be photographed/videotaped by Tim Ball or a representative from GETA to be used solely for teaching purposes and/or future promotional opportunities:  
Parent: \_\_\_\_\_

### Registration Process:

- Please send medical waiver or bring a copy with you to the first day of camp
- Please send and/or bring a photo copy of insurance card(s) both front and back
- Please detach this page and fill out all information.

### Payments:

Payments can be made via:

- A Check made out to “Timothy Ball” sent to 4 Michaels Way, Painted Post, NY 14870
- Payments on Venmo @CorningTennisCamp



### Camp Director:

Tim Ball  
4 Michaels Way  
Painted Post, NY 14870  
607.368.7386



### Camp Helpers:

Varsity Corning Hawks  
Tennis Players

2021  
Corning  
Area  
Tennis  
Camp



## Youth Tennis Camps

Under the direction of Hawks Varsity Coach Tim Ball, and the support of GETA (Greater Elmira Tennis Association), we will be holding the 6th annual youth tennis camps intended for ages 5-18 held at the Corning High School tennis courts during the weeks of **July 19th-23rd and July 26th-30th.**

### Goals for each camp are to:

- Teach Fundamentals
- Tennis Terminology
- Game Play and Strategy
- Fitness and Agility
- Games and Fun

\*Grades are as of September 2021\*

### Session 1

**8:00am - 10:00am**

For Kindergarten (current or entering) through 4th Grade

### Session 2

**10:15am - 12:15pm**

For 5th - 8th Grade

### Session 3

**12:30pm - 2:30pm**

For 9th - 12th Grade

\*A child may participate in other or multiple sessions at Coach Ball's discrepancy

### Cost:

- \$80 per week
- \$140 for both weeks if signed up in advance
- \$65 per week for each sibling
- Special camp prizes will be given the last day of camp
- Daily snacks and drinks will be available

### Weather Policy:

If there is more than one day of cancellation due to rain, we will offer **Saturday, July 24th** (week 1) and **Saturday, July 31st** (week 2) for additional camp days.

## Information

**Player's Name:** \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Age \_\_\_\_\_ Grade (21/22)year \_\_\_\_\_

Tennis Experience \_\_\_\_\_

Email \_\_\_\_\_

### Emergency Contact:

Name \_\_\_\_\_

Phone \_\_\_\_\_

### Additional Permission to pickup child:

Name \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_

### Circle One:

Week 1

Week 2

Both

## Medical Information

### Parent/ Guardian:

Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

### Primary Doctor:

Name \_\_\_\_\_

Phone \_\_\_\_\_