

Application

Name _____ Telephone _____ Emergency Phone _____

Address _____ City/State _____ Zip _____

Birth Date _____ Age _____ Grade _____ E-mail _____

Local Phone & WHB Address _____ Cell # _____

Monday, June 16, 2008 through Sunday, August 31, 2008

Juniors: Prepay for 6 clinics (\$294) in same week and receive 1 free, weather permitting
Prepay for 9 clinics (\$441) in same week and receive 2 free, weather permitting
Prepay for 12 clinics (\$588) in same week and receive 3 free - includes 1 hour private instruction
Prepay for 15 clinics (\$735) in same week and receive up to 6 free - includes 3 hours of private instruction

Free lessons weather permitting - may not combined with another offer or promotion and may not be carried forward regardless of reasons. Unused lessons will not be pro-rated or carried forward regardless of the reasons for missing them.

Session #1	8:45-10:15	10:45-12:15	2:15-3:45
Mon 6/16			
Tues 6/17			
Wed 6/18			
Thur 6/19			
Fri 6/20			
Sat 6/21			
Sun 6/22			

Session #2	8:45-10:15	10:45-12:15	2:15-3:45
Mon 6/23			
Tues 6/24			
Wed 6/25			
Thur 6/26			
Fri 6/27			
Sat 6/28			
Sun 6/29			

Session #3	8:45-10:15	10:45-12:15	2:15-3:45
Mon 6/30			
Tues 7/1			
Wed 7/2			
Thur 7/3			
Fri 7/4			
Sat 7/5			
Sun 7/6			

Session #4	8:45-10:15	10:45-12:15	2:15-3:45
Mon 7/7			
Tues 7/8			
Wed 7/9			
Thur 7/10			
Fri 7/11			
Sat 7/12			
Sun 7/13			

Session #5	8:45-10:15	10:45-12:15	2:15-3:45
Mon 7/14			
Tues 7/15			
Wed 7/16			
Thur 7/17			
Fri 7/18			
Sat 7/19			
Sun 7/20			

Session #5	8:45-10:15	10:45-12:15	2:15-3:45
Mon 7/21			
Tues 7/22			
Wed 7/23			
Thur 7/24			
Fri 7/25			
Sat 7/26			
Sun 7/27			

Session #7	8:45-10:15	10:45-12:15	2:15-3:45
Mon 7/28			
Tues 7/29			
Wed 7/30			
Thur 7/31			
Fri 8/1			
Sat 8/2			
Sun 8/3			

Session #8	8:45-10:15	10:45-12:15	2:15-3:45
Mon 8/4			
Tues 8/5			
Wed 8/6			
Thur 8/7			
Fri 8/8			
Sat 8/9			
Sun 8/10			

Session #9	8:45-10:15	10:45-12:15	2:15-3:45
Mon 8/11			
Tues 8/12			
Wed 8/13			
Thur 8/14			
Fri 8/15			
Sat 8/16			
Sun 8/17			

Session #10	8:45-10:15	10:45-12:15	2:15-3:45
Mon 8/18			
Tues 8/19			
Wed 8/20			
Thur 8/21			
Fri 8/22			
Sat 8/23			
Sun 8/24			

Session #11	8:45-10:15	10:45-12:15	2:15-3:45
Mon 8/25			
Tues 8/26			
Wed 8/27			
Thur 8/28			
Fri 8/29			
Sat 8/30			
Sun 8/31			

Send Check or Money Order to:
 Eastside Tennis Academy
 7 Beach Lane
 Westhampton Beach
 New York 11978
 or deliver to:
 Kimberly's Tennis Shop
 83C Main Street
 Westhampton Beach
 New York 11978
 631-288-1540
 914-234-9462
 631-288-4021
 Prices & schedule subject to change without notice. Must pay by cash or check in advance. Each additional lesson above program will be charged \$49/session (no pro-rating exceptions)
 Quantity discount pricing for sessions may only be used during camp week.
 Classes with only 1 or 2 students may be shortened from 1.5 to 1 hour.
Total fees must be returned with application to guarantee a spot.

Weekly Fee per Session

1. \$ _____
2. \$ _____
3. \$ _____
4. \$ _____
5. \$ _____
6. \$ _____
7. \$ _____
8. \$ _____
9. \$ _____
10. \$ _____
11. \$ _____

Total Weekly Fees: \$ _____
One-Time Registration Fee: \$ 40.00
Total: \$ _____

T-shirt size (circle one)
 Kids: small medium large x/large
 All campers will receive 2 T-shirts and oversize tennis ball

To Parent/Legal Guardian: I authorize the Peter Kaplan Tennis Camp and its personnel to use their judgement in any emergency requiring medical attention for my child and give permission for my child to receive emergency medical care. I hereby release and waive The Peter Kaplan Tennis Camp and its personnel from any and all liability for any injuries incurred while at this camp. I understand that participating in a physical contact sport such as tennis has inherent risks and I hereby agree to hold harmless Peter Kaplan, Eastside Tennis from any injuries my child may incur while participating in this program. We understand and agree to assume all risks associated with participation in this program.

Parent/Legal Guardian
 Signature: _____

Date _____