

2020 JUNIOR TENNIS REGISTRATION



I. CAMPER INFORMATION

NAME:

AGE: ____ (Boy / Girl)

ADDRESS:

Street:

City: _____

State: ____ Zip: _____

PARENT'S INFORMATION:

NAME: _____

EMERGENCY CELL PHONE #:

(____) _____

EMAIL ADDRESS:

II. CAMP DATES

After School Clinic, Monday-Thursday 3:30-5:30 p.m.:

☐ **June 8-11**

Day Tennis Camp:

☐ **Session I: July 7-10, Tuesday-Friday 9 a.m. – 4 p.m.**

☐ **Session II: July 21-24, Tuesday-Friday 9 a.m. – 4 p.m.**

☐ **DAY CAMP** ☐ **½ DAY ONLY**

Overnight Tennis Camp (Sunday-Friday)

☐ **July 26-July 31, Sunday-Friday**

III. CAMP PRICES:

Resident: \$995/week

Day Camp: \$565/week

½ Day Camp: \$275/week

TOTAL: \$_____

III. DISCOUNTS:

- ☐ Returning camper: Subtract \$20
☐ Bring a Friend/Sibling to Camp: Subtract \$20
☐ Other: _____

GRAND TOTAL: \$ _____

IV. PAYMENT:

- ☐ Check ☐ Credit Card: Visa/MC/ Amex/ Discover

Card #: _____ Exp.: _____

- ☐ Deposit of \$100
☐ Full Payment

There is a non-refundable administrative fee of \$100

Make checks out to the Loomis Racquet Academy and send registration to:

**Loomis Racquet Academy
Swarthmore College
500 College Ave.
Swarthmore, PA 19081**

EMAIL: info@LoomisRacquetAcademy.com
PHONE: 610-328-8204
www.LoomisRacquetAcademy.com