

MICHAEL HERD TENNIS COACHING AT PEN-Y-FFORDD TENNIS CLUB



Fun Junior Tennis Coaching Sessions for October Half term 2014 for ages 5 – 16 years old



**Running Tues – Thurs of October 28th, 29th, 30th
(subject to sufficient numbers)**



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**11 - 16 year olds full day camp at 10-3pm
Cost per day = £17 for members and £22 for non-members
Half days - £8.50 for members and £11 for non-members**

**5-7 year olds at 3:30-4:30 and 8-10 year olds at 4:30-5:30
Cost per day = £4.50 for members and £5.50 for non members**

**Early drop off and late pick up available for full day camps
Early drop off and late pick up is available at a slight charge increase**

Camp Information

Camps run at the times above by LTA qualified and licensed Coaches. Each session will have a theme; children will learn to serve, hit forehands and backhands and volleys focusing on technique and tactics. There will also be Fun games, fitness drills, competitions and tournaments played in a fun environment.

Equipment needed

Children must bring a packed lunch. Drinks are available throughout the day. Please bring along suitable trainers and a tennis racquet if you have one. The club will provide spare rackets.

Bad Weather

In the event of bad weather, we will go into the clubhouse; where games, quizzes and table tennis will be provided until the bad weather subsides.

Closing date

Forms must be in by Saturday 25th October.

Contact Michael Herd on 07527 908808 or michaelherdtennis@gmail.com

Bookings

Select the dates and times you would like your child to attend during the holiday period and confirm your booking by contacting Michael Herd on 07527 908808 or michaelherdtennis@gmail.com

Payment should be made by cheque to "Michael Herd" and sent to High Tor, Cefn Bychan Road, Pantymwyn, Mold, Flintshire, CH7 5EL

Cheques will not be cashed in until there are sufficient numbers for the courses to run

Places are limited! Payment is required to reserve your place

Player Details – All details must be filled in!

Name _____ Age _____
Address _____ Date of Birth _____

Contact Tel No _____

Emergency Tel No _____

Postcode _____

Camp dates / times _____

Cheque made out for £_____

Please tick the box if your child will be making their own way home

Participants may on occasions be photographed for media and promotional purposes. Please tick the box if you do not wish your child to be photographed for promotional materials

Please state any medical conditions or injuries that staff should be made aware of

Medical Declaration:

I understand that if my child is taken ill during the course and I cannot be contacted, I consent to the group coach making any urgent decisions with regard to emergency treatment authorised by a doctor.

Name of parent/guardian _____

Signature _____ Date _____