

# CAMP REQUEST FORM

SPORT: Tennis DATES OF CAMP: June 15-19 2015

WHO IS ELIGIBLE?

AGE/GRADE OF PARTICIPANTS: 3-8

NORTON ONLY OR OTHERS: others

HOW WILL THE CAMP BE ADVERTISED? Brochures, newspapers, social media  
(Please attach a copy of the camp brochure/flier)

COST: \$40

COMPLETE THE FOLLOWING:

\*COST BREAKDOWN PER CAMPER

T-Shirt/Jersey	_____	Instruction	<u>\$ 40</u>
Refreshments	_____	Advertising	_____
Prizes	_____	Additional Costs	_____
Total	_____		

\*NAMES OF COACHES/INSTRUCTORS:

Phil Seenes Angie Carretta Kyle May

\*SALARY BREAKDOWN OF COACHES/INSTRUCTORS:

\$ 100 for entire camp

The following should be included in your camp brochure/flier:

\*A SPECIFIC TIME SCHEDULE FOR EACH DAY

\*OBJECTIVES

\*FACILITY USE - PLACES, DATES AND TIMES

(Note: Outside groups must complete facility use form and provide liability insurance)

<u>Phil Seenes</u>	<u>4-19-15</u>
(Signature of Sponsor)	(Date)
<u>Angie Carretta</u>	<u>5/6/15</u>
(Signature of Athletic Director)	(Date)
<u>Phil Seenes</u>	<u>5-9-15</u>
(Signature of Building Principal)	(Date)
<u>Phil Seenes</u>	_____
(Signature of Superintendent)	(Date)



# 2015 NORTON SUMMER TENNIS CAMP



WHO: Any students entering grades 3-8 in the 2015-2016 school year.  
Registration is **NOT** limited to Norton students.

WHEN: June 15th-19th 10:00-11:00am

WHERE: Columbia Woods Tennis Courts-Norton

COST: \$40 (\$20 for each additional sibling) \*Make checks payable to Norton City Schools\*

The Camp will consist of teaching the basics of the game (forehands, backhands, volleys, overheads, serves), hand-eye coordination drills, court positioning, scoring, games, contests, & prizes!

Please register by mail by sending the completed form below to:

Athletic Office % Phil Seenes  
Norton High School  
4128 S. Cleveland-Massillon Rd.  
Norton, OH 44203

If you have any questions, please contact Coach Phil Seenes at [pseenes@gmail.com](mailto:pseenes@gmail.com) or 330-607-6306

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(Student Name) \_\_\_\_\_, has my permission to attend the Norton Summer Tennis Camp. I hereby waive and release the Norton City Schools and all instructors of any responsibility for injuries or illnesses received while participating in the program.

Grade \_\_\_\_\_ (2015-2016 school year)

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Contact #

Please register by June 12th 2015