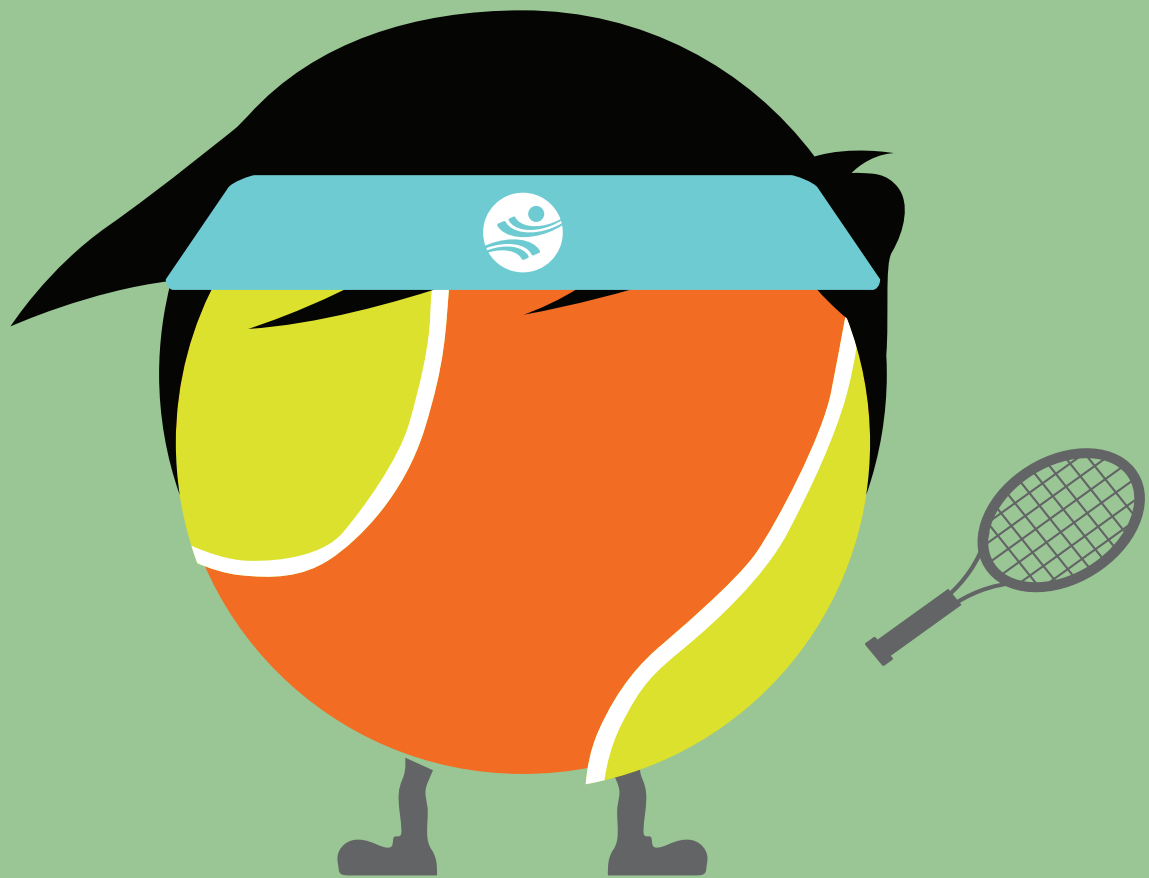


# 2021 Summer Tennis Academy



The Athletic Clubs

**Tennis Academy**

<http://www.lrac.com/tennis/junior-academy>

Little Rock Athletic Club | 501-225-3600

Little Rock Racquet Club | 501-225-5711

*play on*

Now kids 12 and under can compete like the big kids because the smaller courts, slower balls and appropriate sized rackets let them learn fast.

## Tennis Tots

The goal of Tennis Tots is inspiring young children in a fun and nurturing atmosphere and teaching them developmentally sound and age appropriate physical skills (including coordination, balance, agility, reaction, jumping, skipping, throwing, catching, tracking, handling the racquet and hitting). Parent participation is encouraged.

**Age Guideline:** 3 - 4

**Class Length:** 45 minutes

## Red Ball

From the moment they step on the 36 foot court, kids learn the physical skills necessary to rally the ball and play the game of tennis, including coordination, balance, agility, reaction, jumping, skipping, throwing, catching, tracking, handling the racquet and hitting with biomechanically sound technique. Both introductory and more advanced classes are offered.

- **Stars:** This class is designed for beginning players. Stars spend a large percentage of their time learning the physical skills necessary to play tennis. They also participate in competitive games and limited point play.

**Age Guideline:** 4 - 6

**Class Length:** 60 minutes

- **Aces:** Aces players are continuing to develop basic skills introduced and practiced in Stars. Players work on technical stroke production, movement, and point play when able to rally balls. The players who have started to play points and rally would enjoy and benefit from playing USTA Team Tennis.

**Age Guideline:** 5 - 8

**Class Length:** 60 minutes

## Orange Ball

Playing on a 60 foot court, kids hone their skills and stroke technique. Both introductory and more advanced classes are offered. Class size is limited to 5 students.

**Age Guideline:** 9 - 10

**Class Length:** 60 minutes

- **Orange Ball:** Classes are designed for beginning players and players who have progressed from Red Ball classes. Players work on the physical skills necessary to play tennis as well as stroke biomechanics, consistency and movement. Players with more tennis experience continue to work on technical stroke production and point play. They also are introduced to point and match play and taught basic tactics and strategy. These students would enjoy and benefit from USTA Team Tennis and novice tournaments.

## Green Ball

Green Ball is designed for players who have aged out or leveled up from Orange Ball. Players in Green Ball groups range from beginners to tournament level players. Each participant will be grouped according to tennis experience and ability. Now on a full size court, players work on the physical skills necessary to play tennis as well as true biomechanics, consistency, and movement. They also participate in competitive games and point play.

**Age Guideline:** 11 - 13

**Class Length:** 60 minutes

## Yellow Ball

This class is for players who have developed the basic skills taught in Green Ball. Students work more on technical stroke production and point play. They also are introduced to match play and taught basic tactics and strategy. Many of these students would benefit from playing USTA team tennis and tournaments.

**Age Guideline:** 12+

**Class Length:** 60 minutes

## Performance Academy

Many of our Orange, Green and Yellow Ball students participate in an invitation only program called Performance Academy. This advanced training is geared toward tournament players and focuses intensely on stroke biomechanics, game strategy, fitness and competitive play. If you would like to know more about Performance Academy, please contact one of the Tennis Academy Directors.

## QUESTIONS?

Please contact Will Campbell, 501-551-0997/willcampbell@lrrcfc.com at the LRRC or Leslye Gibbens, 501-960-1263/leslyegibbens@lrac.com at the LRAC.

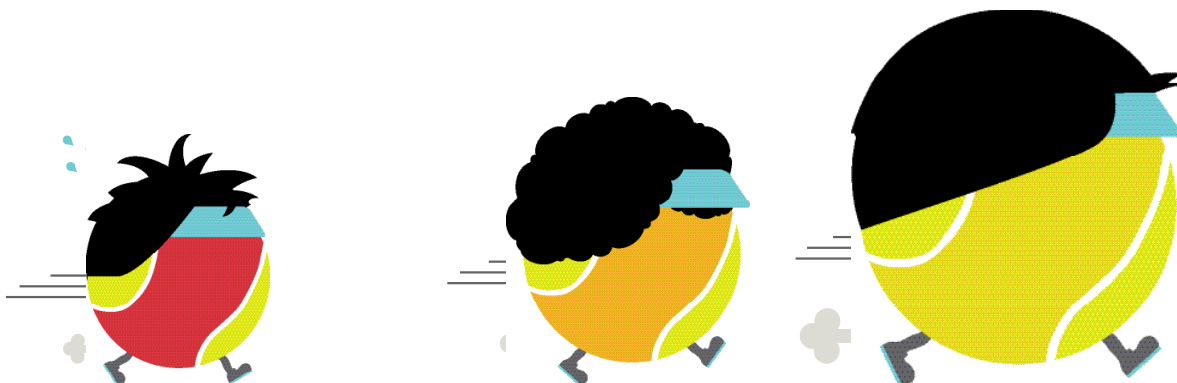
# SUMMER 2021 CLINIC OPTIONS

## (MONDAY, JUNE 7 - SUNDAY, AUGUST 15)

LITTLE ROCK ATHLETIC CLUB						
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
4:00 - 5:00 pm	RB Stars RB Aces OB GB	RB Stars RB Aces OB GB	RB Stars RB Aces OB GB YB	RB Stars RB Aces OB GB		
5:00 - 6:00 pm	RB Stars RB Aces OB GB YB	RB Stars RB Aces OB YB	RB Stars RB Aces OB GB YB	RB Stars RB Aces OB GB YB	OB	

LITTLE ROCK RACQUET CLUB OPTIONS						
	Monday	Tuesday	Wednesday	Thursday	Friday	Sunday
9:00 - 10:00 am	RB Stars RB Aces OB	RB Stars RB Aces OB	TT RB Stars RB Aces OB	RB Stars RB Aces OB	RB Stars RB Aces	
3:00 - 4:00 pm						OB
4:00 - 5:00 pm						RB Stars RB Aces
5:00 - 6:00 pm	RB Stars RB Aces OB	RB Stars RB Aces OB	RB Stars RB Aces OB	TT RB Stars RB Aces OB		

The Tennis Academy reserves the right to change class type, day, time and/or coach as needed.



### QUESTIONS?

Please contact Will Campbell, 501-551-0997/willcampbell@lrrfc.com at the LRRC or Leslye Gibbens, 501-960-1263/leslyegibbens@lrac.com at the LRAC.

## OUR EXPECTATIONS

Like dance lessons and sports seasons, you are making a commitment to spend the entire session with us when you join the Tennis Academy. Our goal is to teach your child to play tennis - great tennis if they're willing to work hard. In order for that to happen, we need to see his/her happy face here - regularly and often. If you absolutely must drop mid-session, **we must be notified by the 15th of the month** via a text to Leslye or Will (see numbers below) to avoid being charged for the following month. For families that have paid in full for the session, we will refund the equivalent of installment payments still remaining in the session.

## NON-MEMBER SESSION FEE

Membership dues help underwrite the expense associated with the maintenance and utilities related to tennis courts. To make things more equitable, we charge a \$35 usage fee for those players that are not associated with an active membership at one of our Clubs so that they, too, share in some of the operating expenses. Please note, should a player start the session as a TAC member but, for some reason that status changes, then the full usage fee will be charged regardless of how far we are into the session.

## SESSION FEES

<b>SUMMER 2021</b> June 7 - August 15	Attend 1 Clinic per Week for 10 weeks*	Attend 2 Clinics per Week for 10 weeks	Attend 3 Clinics per Week for 10 weeks*	Attend 4 Clinics per Week for 10 weeks*
60 Minute Lesson	\$200	\$380	\$550	\$710
Non-member Session Fee*	\$35	\$35	\$35	\$35

\*This fee is non-refundable and will be charged if the player's status is "non-member" at anytime during the season.

## SESSION FEE FORMULA

The session fees are built on the following base pricing:  
60 minute lessons - \$20 per day

The 2nd, 3rd and 4th day fees are discounted 10, 15 and 20 percent respectively.

## HOLIDAY

Lessons WILL be held:  
Sunday, July 4

## PAYMENT OPTIONS

The session fee may be paid upfront **or in installments**. If paying in installments, a draft source is required and charges will occur on the 12th of the month. Fees are prorated for those who join mid-session.

## FOR MORE INFORMATION

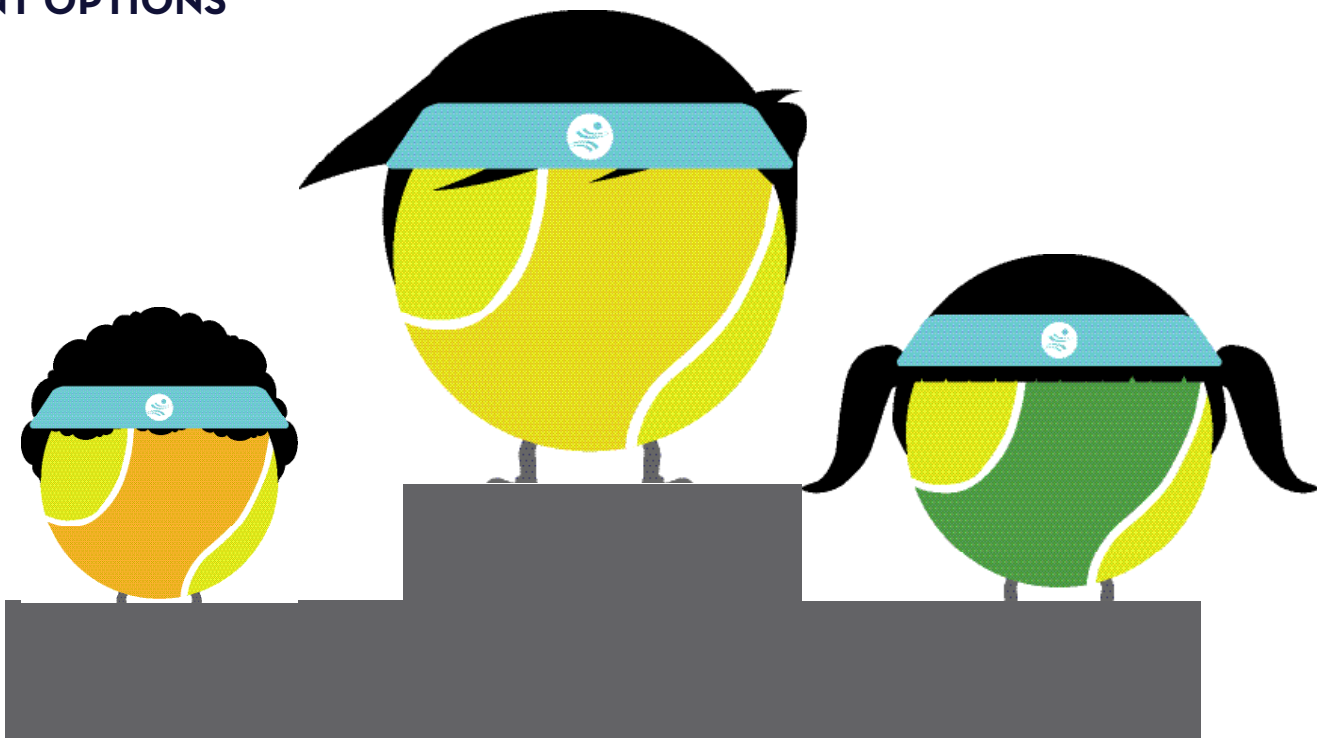
Please contact the appropriate tennis professional:

**Little Rock Athletic Club**

Leslye Gibbens, 501-960-1263

**Little Rock Racquet Club**

Will Campbell, 501-551-0997



For Office Use Only - Child Is Confirmed In:

Level Day Time Location

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# TENNIS ACADEMY PLAYER REGISTRATION

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Male Female

Child is an:  LRAC Member  LRRC Member  NLRAC Member  Non-Member

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mother's Phones (day/cell): \_\_\_\_\_ Father's Phones (day/cell): \_\_\_\_\_

Email (for program updates): \_\_\_\_\_ Desired Start Date: \_\_\_\_\_ Child's Shirt Size: \_\_\_\_\_

Person to contact in case of emergency if parents cannot be reached: \_\_\_\_\_

Phone(s): \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Room of Choice: \_\_\_\_\_

Allergies, medications, special conditions including but not limited to asthma, diabetes, sun sensitivity, seizures or fainting spells (please provide specifics): \_\_\_\_\_

## CLINIC SELECTION

Parents, if your child is new to the Academy, please review our class descriptions on the Sized to Fit information piece or on our website ([www.lrac.com/tennis/junior-academy](http://www.lrac.com/tennis/junior-academy)) and make your best guess as to your child's level for purposes of this registration form. We will confirm (or change) your selection after evaluating your child. To schedule the day and time of your child's free evaluation, call Mary Bowen at 501-680-4030.

For maximum improvement, we recommend enrolling your child in at least two clinics a week. Please complete the remainder of this form and return it to the club. We will confirm enrollment.

Level: (circle one)	Tennis Tots	Red Ball Stars	Red Ball Aces 2	Red Ball Aces 1	Red Ball Squad
Orange Ball 2	Orange Ball 1	Orange Ball Squad	Green Ball 2	Green Ball 1	Yellow Ball

How many days a week do you want your child to attend? (circle one) 1 2 3 4

### Clinic Choices

Please refer to Sized to Fit for the schedule of classes and indicate your preferences (as well as any notes you may have) here. Be sure and include day of week, time and club. PRINT LEGIBLY!

1st \_\_\_\_\_

2nd \_\_\_\_\_

3rd \_\_\_\_\_

4th \_\_\_\_\_

5th \_\_\_\_\_

## PAYMENT INFORMATION

Person Responsible for Payment: \_\_\_\_\_

Responsible Party's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

I want to pay my entire session fee up front.  I want to pay my session fee in installments.

Method of Payment (Indicate your choice by completing the appropriate information below):

For security reasons, your payment information will be encrypted by our computer software and this information will be shredded.

LRAC/LRRC/NLRAC Club Account Option (for members only/account must be current)

Name of Member to be Charged: \_\_\_\_\_

Bank Draft Option (attach a voided check or complete the following)

Name as Listed on Account: \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Credit/Debit Card Option (Visa, MasterCard, Discover, American Express)

Name as Shown on Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CCV Number: \_\_\_\_\_

**NOW SIGN THE WAIVER ON THE BACK!**

## PARTICIPANT RELEASE OF LIABILITY & ASSUMPTION OF RISK AGREEMENT

I understand and acknowledge that this is an agreement between myself and the auspices of the Little Rock Athletic Centers, LLC, dba Little Rock Athletic Club, Little Rock Racquet Club, North Little Rock Athletic Club and Downtown Athletic Club (collectively referred to as LRAC). I further acknowledge that I have the ability to read and have been provided the opportunity to read this agreement before signing.

I understand and agree that being allowed to participate and utilize the equipment, programs, supplies, services, staff and facilities at LRAC is good and valuable consideration for this agreement.

I understand that the nature of LRAC's facilities and equipment contemplate that other members, guests and staff will have access to the equipment, supplies and services available at LRAC. While LRAC takes reasonable steps to insure the safety and sanitization of the equipment, programs, supplies, services and facilities, it cannot and does not guarantee that the equipment, programs, supplies, services and facilities are germ / virus free (this includes, but is not limited to COVID-19). I acknowledge the individual responsibility regarding these issues and hereby waive any and all claims related to such issues should I or my children choose to participate and/or utilize the equipment, programs, supplies, services and facilities. I also acknowledge the individual responsibility regarding the fact that other members, guests or staff may be present and may have medical conditions and/or infections wholly independent of LRAC. I hereby waive any and all claims related to such issues should I or my children choose to participate and/or utilize the equipment, programs, supplies, services and facilities while other members, guests or staff are present.

**RELEASE AND AGREEMENT NOT TO SUE:** I understand, acknowledge and agree that the equipment, programs, supplies, services and facilities at LRAC are voluntary and that they involve inherent risks. The risk of injury includes the risk of use and the risk of misuse. The possible injuries include the potential for permanent paralysis and death. I knowingly and freely assume all such risks, both known and unknown and assume full responsibility for my participation and that of my children. I knowingly and freely agree to waive any claim for injury sustained at LRAC and agree not to sue LRAC (including its managers, officers, officials and/or employees) whether or not the claim for injury was caused by the negligence of LRAC, its managers, officers, officials and/or employees. I further agree to indemnify and hold harmless LRAC against any and all damage, loss, cost and expense related to any injury or harm I or my children might sustain.

*Photography and/or Video* - I understand that LRAC periodically takes facility and group photographs and videos and uses the resulting content for lawful purposes including, publicity, illustration, advertising and web content. I grant to LRAC and all its subsidiaries the right to take photographs and/or videos of myself or my children. I authorize LRAC, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that LRAC may edit and use such photographs and/or videos for any lawful purpose..

*Text and Email Communication* - By opting in to receiving text and email messages from LRAC, I agree to allow LRAC and all its subsidiaries, agents and service providers to contact me with promotional and informational texts and emails at the phone number(s) and/or email address(es) provided. I acknowledge that providing these phone numbers and email addresses is not a condition of receiving any property, goods or services. By listing this information, I certify that it is accurate and that I own the rights to use it and give consent for it/their use. Additionally, I understand that I may unsubscribe at any time to these communications.

### MY SIGNATURE CONVEYS

- I have read all of the above, fully understand its meaning and that I have given up substantial rights and granted specific permissions which I do freely and voluntarily without any inducement or coercion.
- I give my consent for my child to receive medical or surgical aid as may be deemed necessary and expedient by a duly licensed or recognized physician or surgeon in the case of an emergency when a parent or guardian cannot be reached. Consent is also given for an LRAC employee or his/her duly appointed representative to transport my child for emergency medical treatment in said situation;
- I authorize the LRAC to draft my Tennis Academy fees as indicated on my payment information page which will be shredded;
- I understand that I will be charged a registration fee if I do not meet the registration due date; and
- I understand and agree with the policies on mid-session drops.

Print Parent's/Guardian's Name: \_\_\_\_\_

Parent's/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_