

Eatontown Recreation
 (Borough Hall)
 47 Broad Street, Eatontown, NJ 07724
 (732) 389-7607 or email rec@eatontownnj.com



SPRING 2010 YOUTH TENNIS

The Eatontown Recreation Department will be accepting registrations for our 2010 **SPRING Youth Instructional Tennis**- from April 18th through May 30th. The program is for Eatontown boys and girls who are completing **GRADES 3 – 8** this coming June- 2010. This six-week program will focus on the basic skills of tennis such as conditioning drills, grip, forehand & backhand swing, volley & serve.

Our instructor for the clinic is Jean Hoffmire. Jean has many years of experience in instructing tennis and with children. All sessions will be held at **WOLCOTT PARK** tennis courts on the following **SUNDAYS**:

April 18th, April 25th, May 2nd, May 16th, May 23rd, May 30th No Clinic on Mothers Day
 Sessions are as follows:

3rd & 4th Grade
 A) 2:00 PM – 3:00 PM

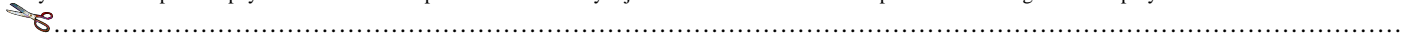
5th & 6th Grade
 B) 3:15 PM – 4:15 PM

7th & 8th Grade
 C) 4:30 PM – 5:30 PM

The **fee** for the program is \$60.00 per child or \$90.00 per family. Checks must be made payable to the "Borough of Eatontown." Refunds will only be given when requested prior to the first session. Free services are available to those without the ability to pay. Call the Recreation Office at (732) 389-7607. Registration dates are March 22th through April 16th. **NOTE: Any persons who register after April 16th 4:00PM will be subject to a late registration fee of \$20.00 (per family). Programs have limited space and will be reserved on a first come first serve basis.**

◆ For current and future recreation programs, visit our website at www.eatontownrecreation.com

While the Borough of Eatontown maintains liability insurance covering the Borough for injuries or expenses occurring by reason of its negligence, the Borough does not carry insurance to provide payment for medical expenses occasioned by injuries unrelated to fault on the part of the Borough or its employees.



Youth Instructional Tennis

Adult Last Name _____ Adult First Name _____

Address _____ Email-PLEASE PRINT: _____

Primary Telephone #: _____ Emergency #: _____

Participant Name	Grade	Age	(M/F)	Fee	Session (A, B or C)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Child requires reasonable modifications because of a disability in order to participate. Yes _____ No _____