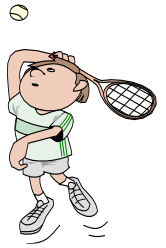




SUMMER TENNIS / PICKLEBALL & FITNESS ACADEMY 2022



Sponsored by Hamden Recreation Department
www.hamden.com
& NILS NATION TENNIS & FITNESS ACADEMY
nilsleblang@yahoo.com

Director, Nils LeBlang, focuses on instruction of basic strokes, fundamentals of the game and fitness. The summer clinics are for boys & girls of all levels. The clinics are 60 minutes long and held on Mondays & Wednesdays. Rain dates will be made up.

Location: Mix Ave., Tennis Center, next to Ice Skating Rink.

13 & Under Tennis Academy

Session 1: June 20-July 13 Time A
Session 2: July 18-August 10 Time A

Time A: 9:30am-10:30am; ages 5-13
Cost: Session #1 & #2: \$95 per session

Jr. Summer TEAM USTA/CTA

Intensive Intermediate Level Player Clinic

Coach: Nils LeBlang – Sacred Heart Girls Tennis Coach & USTA Developmental Coach
Ages: 10-18; boys & girls
Dates: June 20-August 2
Time: 10:30-11:30am
Cost: \$125

Mondays & Wednesday, inter-club matches played on Thursdays 1 – 3pm

Make check payable to Nils LeBlang and mail along with completed application to:
Hamden Recreation Dept., 2750 Dixwell Ave., Hamden, CT 06518, c/o Tennis
Enrollment is limited – register early

Contact: Nils LeBlang: Email: nilsleblang@yahoo.com for additional information

*****CUT HERE*****

Summer Tennis - 2022

Name _____ Phone _____ Age _____

Address _____ City _____ Zip _____

E- mail _____ School Attending _____

Please check off session/sessions:

Summer Tennis & Fitness Academy

Session 1: June 20 – July 13; (9:30-10:30am) _____ \$95
Session 2: July 18 – August 10; (9:30-10:30am) _____ \$95

Jr. Summer Team: _____ \$125

I, _____, parent/guardian of _____ do hereby give my permission for my child to participate in the Nils Nation Summer Tennis & Fitness Academy. I, for myself, my spouse, my child/guardian and on behalf of my heirs, assigns and next of kin, assume all risks and hazards incidental to the conduct of activity, including those associated with transportation for outside field trips. I, for myself, my spouse, my child/guardian and on behalf of my heirs, assigns and next of kin, agree to hold Nils Nation Tennis Academy harmless and waive all rights or claims for liability, damages or benefits of any nature, whether legal or equitable, against the Nils Nation Tennis Academy in the event of any injury, accident, natural causes or any illness as a result of participation in the Nils Nation Tennis & Fitness Academy. I also grant permission for medical treatment and if necessary hospitalization by ambulance transport.

Signature of Parent/Guardian _____ Date _____