

TENNIS CAMP

AT THE QUADRANGLE CLUB
1155 E. 57TH STREET CHICAGO IL 60637
FOR INFO: 773.702.7221 QUADCLUB.UCHICAGO.EDU/TENNIS



QUADRANGLE CLUB TENNIS CAMP

THE Quadrangle Club has been serving the University of Chicago's faculty, staff and community members since 1922, offering fine dining and catering services guest rooms for overnight stays and top-rate tennis facilities with 3 beautiful courts located in the heart of the University's campus.

CAMP HIGHLIGHTS

- Strategic Tactical Development
- Fitness
- Stroke Perfection
- Tournament Play
- Mental Toughness
- Goal Setting and Evaluation
- USTA 10 and Under Format
- Good Old Fashioned FUN!!!

SEND REGISTRATION TO:

THE QUADRANGLE CLUB
ATTN: PAT HENEGHAN
1155 E. 57TH STREET
CHICAGO IL 60637
773 368-4900
PWH818@GMAIL.COM

CAMP INSTRUCTORS

The tennis camp is under the direction of Pat Heneghan, USPTA Certified head pro at the Quadrangle Club. All instructors have been selected for their skills and passion of tennis, their ability to work with others and communicate with children of all ages and abilities. Instructors attend pre-camp training session and are dedicated to bringing out the best in each player. This is the 6th year for the camp, with over 600 participants.

CAMP INFORMATION

All camps run M–Th with Friday as a rain date . Afternoon sessions will be available upon demand. Players will be grouped into age and level specific categories.

All players must have racquets and tennis shoes. Junior racquets for 10 and under and regular racquets will be available for purchase at best competitive pricing.

PRICING AND TIMES

Ages 4-10 : Drills to teach the basics of tennis using the USTA 10 and under format.

Cost \$80/week Time 8:45am-10:00 am

Ages 10-17: Recreational and competitive players are welcome with individual direction provided at appropriate level

Cost: \$160/week Time: 10:00-12:30

Match Play 11:45-12:30

REGISTRATION

Make payment to: Quadrangle Club

Name Camper: _____

Age: _____ Phone: _____

Address: _____

City/State/Zip: _____

Parent/Guardian Name: _____

Emergency Phone _____

Email: _____

SELECT CAMP SESSION

WEEK	4-10 Y/O	10-17 Y/O
Aug 28-31		

Waiver/Release I recognize and acknowledge that there are certain risks of physical injury associated with outdoor tennis play and competition. I agree to assume the full risk of any injuries, damages and losses regardless of severity or amount, which my child sustains arising in connection with the tennis program. I agree to waive and relinquish all claims I have arising against Pat Heneghan/Quadrangle Club and any employees or independent contractors hired to direct, manage, supervise or teach the program. I do hereby fully discharge and release the Quadrangle Club and personnel and from any and all claims, causes of action and liabilities of any nature for injuries or losses with participation in the tennis program/camp.

Signature _____

Date: _____