

CenTex Scoop-It-Up Tennis
Beginner Level Junior Tennis Program
Children grades K-5. No experience necessary!

DATES & LOCATIONS for Fall 2010:

Sundays Oct. 3-31 - Small MS, 4810 Monterrey Oaks, 78749

Saturdays Oct. 9-Nov. 6 - McNeil HS, 5720 McNeil Dr. 78729

Sundays Oct. 10-Nov. 7 - Westwood HS, 12400 Mellow Meadow 78750

TIME: 2:00-3:30 for K-2nd grades, 4:00-5:30 for 2nd-5th grades
(2nd graders may choose either time)

COST: \$90 includes new junior racquet, t-shirt, QuickStart ball.

\$5 discount for siblings. Call Judy at 288-9643 for questions about the program and discount if your child has the proper sized racquet.

FORMAT: Players grouped into teams of 5-6 kids. Teams learn & practice tennis skills then compete against each other. All instruction and play is within the times listed above. A Site Director leads the instruction and organizes play, but PARENT COACHES are needed for each team. No experience is necessary! A training session will be held Sunday, Sept. 26 from 3:00-5:00 at Small MS for the Small site and Saturday, October 2 from 2:00-4:00 at McNeil HS for McNeil & Westwood sites.

Register online at www.scoopituptennis.org or complete form below and mail check or money order to:

CenTex Scoop-It-Up, 6004 San Paublo Ct, Austin, TX 78749

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Child's Name: _____

Date of Birth: _____ Circle: M F Home Phone: _____

Address: _____

City: _____ Zip: _____

Parent Name: _____ Cell: _____

Email address: _____

(used for contacting parent with info pertaining to this program)

Location: _____ Small MS _____ McNeil HS _____ Westwood HS

Check one: _____ 2:00-3:30 (K-2nd) _____ 4:00-5:30 (2nd-5th)

Circle T-Shirt Size: Youth: S M L Adult: S M L

Yes, I will help as a Parent Coach!

Name: _____

Phone: _____

Email: _____

WAIVER MUST BE SIGNED BY PARENT OR YOUR CHILD WILL NOT BE ALLOWED TO PARTICIPATE.

LIABILITY WAIVER:

CenTex Scoop-It-Up does not provide accident or medical insurance for program participants.

I grant CenTex Scoop-It-Up or its agents permission to transport my child in the event of an emergency and I am unable to be contacted.

I recognize that participation in Scoop-It-Up Tennis may expose my child to some risk of injury.

I agree to hold CenTex Scoop-It-Up, the USTA, Round Rock ISD and Austin ISD harmless from any claims for damage to any property or injury to persons which may occur through participation in the Scoop-It-Up program.

I have read and understand the above information. My child has permission to participate in the CenTex Scoop-It-Up Tennis Program in accordance with the conditions set forth above.

Signature of Parent: _____

Date: _____

Call 288-9643 for more information or email
judy@scoopituptennis.org

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