



## Evening Adult Tennis Clinics - Sept 2010

Spaces are limited: Sign up 72 hours in advance for availability.

Classes Require a Minimum of 4 Registered Students.

Payment is for the current session only.

A pro-rated fee is calculated when a player begins after the clinic session has started. The rate is paid for the remaining days of the session. No make-ups or carry over fees to another session.

1116 N Cole Rd

Boise, ID 83702

208-376-1052 Phone

208-376-1747 Fax

www.boisetennis.com

- **1.0-2.0—Basic Skills**—5 Wednesdays, 5:30-7:00pm, Sept 1 - 29. For Players New to the Game of Tennis.  
**Led by John Armstrong:**  
**Member: \$60.00    Guest: \$85.00** (Ring under Basic Skills)
- **2.5-3.0—Developing Skills**— 5 Wednesdays 7:00-8:30pm, Sept 1 -29. For Low Intermediate Players.  
**Led by John Armstrong:**  
**Member: \$90.00    Guest: \$115.00** (Ring under Dev. Skills)
- **3.0 & above—Cardio Tennis—“Heart Pumping Fitness”** 5 Thursdays, 6:30-7:30 pm, Sept 2 -30. Fast paced, heart pumping tennis drills and exercises. Players grouped by ability. Participants should be in good physical condition, injury free and be able to pace themselves.  
**Led by John Armstrong:**  
**Member \$75.00    Guest \$100.00** (Ring under John Cardio)
- **3.5 & UP—Skills & Drills**—4 Tuesdays, Sept 7 - 28. 5:30-7:00pm. Tune up your Tennis Skills with Fast Paced Drills.  
**Led by Pete Peterson with Stephen Dial:**  
**Member: \$72.00    Guest: \$92.00** (Ring under Skills Drills)
- **3.5 & up—Boot Camp**—5 Thursdays, Sept 2 - 30, 7:30 - 9:00pm For Players seeking the mix of drilling and conditioning  
**Led by John Armstrong:**  
**APPROVAL BY LEAD PROFESSIONAL REQUIRED PRIOR TO SIGNING UP...**  
**Member: \$90.00    Guest: \$115.00** (Ring under Boot Camp)

### Adult Tennis Clinics

Sept 1 -30, 2010

Sign up deadline: 72 hours prior class. Minimum class size: 4.

**Payment is for current session only. No make-ups or carry over fees to another session.**

Name: \_\_\_\_\_ Age \_\_\_\_\_ Rating \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone #: (Day): \_\_\_\_\_ (Eve): \_\_\_\_\_

Name of Program: \_\_\_\_\_

Email address: \_\_\_\_\_