

2024 Spring Junior Tennis Clinics



Starts **March 18 through May 9 (minimum 10 SESSIONS)** with 4 priced-in rain dates

No sessions on 3/27, 3/28, 4/1, and 4/2 (Good Friday/Easter week).

Ages	Days	Time	Member	Non-Member
Ages 5 – 6 Beginner (Red Ball)	Mon/Wed	4:30 - 5:15 PM	\$125	\$150
Ages 7-8 Beginner/Int. Beg (Orange ball)	Mon/Wed	5:15 – 6:30 PM	\$165	\$195
9+ Beginner/Int. Beg	Tues/Thur	4:30 - 5:30 PM	\$165	\$195
Intermediate/Advanced 10+ (Coach Invite)	Tues/Thur	5:30 – 6:30 PM	\$165	\$195
One Day/week Int./Adv. 10+ (Coach Invite)	Tues/Thur	5:30 – 6:30 PM	\$90	\$110

Ages 5-6 Red Ball: Proportionate sized racquets, low compression (red) balls and mini-courts are used in order to introduce kids to the fundamentals of tennis, learning to play real points and having fun in the process. Courts are divided between beginner (I) and those who are able to maintain a rally (II)

Ages 7-8 Orange Ball: Lessons will be taught following the United States Tennis Association 10 and under teaching format, utilizing shorter court dimensions, low compression balls (orange) and proper-sized racquets. Courts are divided between beginners (I) and those able to maintain a rally and serve (II)

Ages 9+ Beginner/Int. Beg.: Clinics utilize full sized court, but with emphasis on building fundamental strokes and mechanics. The goal is to advance players to competitive play. Courts are divided between beginners (I) and those able to maintain a rally and consistently serve (II)

Intermediate/Advanced (Requires coach invite): This clinic is for year-round players who consistently maintain a rally, and execute serving and volley strokes. Emphasis is on developing and building fundamental tennis skills, strokes, and competitive tactics. This session is geared towards players committed to competitive tournament match play. This session is ability based.

NOTE – the Intermediate and Advanced Clinics offer 1/week options, to allow for Middle School Practice

What to Bring: Proper athletic shoes, tennis racquet and a water bottle **APPLY 10% DISCOUNT TO 2nd CHILD**

PLAYER REGISTRATION #1

Child's Name: _____
 Date of Birth: _____ Age: _____ Sex: M / F
 Group: Red: ___ Orange: ___ Green: ___
 Adv/Int ___ One-day/wk Int./Adv. _____

PLAYER REGISTRATION #2

Child's Name: _____
 Date of Birth: _____ Age: _____ Sex: M / F
 Group: Rd: ___ Orange: ___ Green: ___
 Adv/Int ___ One-day Int/Adv 11+ _____

PARENT/GUARDIAN INFORMATION:

Parent/Guardian Name: _____
 Relationship to Child: _____
 Street Address: _____
 City, State, Zip: _____
 Contact Number: _____
 Email Address: _____

Checks can be made payable to the Langford Farms Club.
 If you would like to pay via credit card, please provide the following:

Card # _____ Exp. _____
 Name on card _____
 CVV # _____



I grant permission for the above named child(ren) to participate in all planned clinic activities, and absolve the LFC and its personnel from any liability for injury or loss sustained by the child while engaged in such activities. I authorize the staff to provide emergency medical care at my expense. The LFC is not responsible for lost, stolen or damaged personal property.

Signature of Parent or Guardian _____

Date _____