

# 2024 SUMMER CAMPS REGISTRATION FORM

#### PARTICIPANT'S INFORMATION

Participant's F	Full Name	
Gender	☐ Male ☐ Female	
Date of Birth (mm/dd/yy)		
Special Physica Allergies	l / Medical conditions /	
Parent's / Gua	rdian Full Name	
Phone number		
E-mail		
Physical Addre	ss / City / Zip Code	

#### **TENNIS PROGRAM**

prioritize Shockwave Tennis, we high-quality tennis training, focusing on tangible results. Our mission is to enhance participants' tennis skills, fitness, and mental resilience through diverse classes including practical, athletic, and theoretical sessions. With a structured program comprising various levels, each level is tailored to achieve specific goals, ensuring genuine progress. Our Summer Camps offer tailored Comprehensive Programs for Beginners, Intermediate, and Advanced Players. Participants will be assigned by Shocwave staff based on availability and tennis level.

#### **CALENDAR & SCHEDULES**

Our Summer Weekly Camps for 2024 run from June 1st to June 28th, with sessions scheduled Monday to Friday, 5:00 to 8:00 pm.

## **CAMPS LOCATION**

Camp will be held at 27440 Kuykendahl Rd, Spring TX 77380, at the School of Science and Technology Tennis Courts. However, Shockwave Tennis may relocate nearby due to unforeseen circumstances.

#### **MAKE-UPS**

When you register for our Weekly Camps, you're reserving the participant's spot for the week, not their attendance. Therefore, we do not offer make-up classes or credit for missed ones. Additionally, in the event of rain,

Shockwave will unilaterally adjust the class type scheduled for that day (practical, athletic, theoretical, conferences, etc.)

#### **PARTICIPANT GUIDELINES**

For an optimal experience at our Summer Camps, please follow these guidelines:

- Get sufficient rest by going to bed early before camp days.
- Maintain a healthy diet with balanced meals, including breakfast each morning, and bring energy-boosting snacks like fruits and energy bars.
- Stay hydrated by bringing water, sports drinks, Pedialyte, etc. (consider using a small cooler with ice).
- Wear appropriate sports attire, including tennis shoes and an extra shirt for water activities.
- Protect yourself from the sun with hats, bandanas, and sunscreen.
- Bring a properly strung racket with the right grip.
- Arrive at the camp location at least 5 minutes early; activities start promptly at 5:15.
- Display respectful behavior on and off the courts, maintaining courtesy throughout the training.
- Keep a calm demeanor and avoid rough play or loud disturbances during camp sessions.

#### **PARENT GUIDELINES**

- Parents or accompanying persons cannot stay at the camp location to avoid disrupting participants' focus.
- We encourage parents to use the valet line for drop-off between 4:45 and 4:55 pm and for pick-up between 7:45 and 8:00 pm, remaining in their vehicles.

#### **CAMP RATES & PAYMENTS**

Our weekly Camp Rate is USD\$295

Secure your spot in the desired Weekly Camp by paying the Summer Weekly Camp Rates in advance. Payments can be made via shockwavetennis.com/summer-camps or using ZELLE to SHOCKWAVE at (346) 370-4736. Cash payments are not accepted, aPayments are not refundable

#### **WAIVER & RELEASE**

By participating in the Shockwave Tennis Academy Program, I, as the participant or as the parent/guardian of a minor participant (referred to as "I" collectively), acknowledge and agree to the following:

I waive	all rights an	d claim	s for dama	ges
against	Shockwave	Tennis	Academy,	its
affiliates	s, agents, rep	resenta	tives, coach	nes

officers, directors, and associated entities for any injuries or damages incurred during the Program.

- ☐ I accept personal responsibility for any resulting damages, including bodily or mental injury, disability, economic loss, or death.
- ☐ I affirm that I am in good physical health to participate in the Program.
- ☐ I agree to indemnify and hold Shockwave Tennis Academy harmless from liabilities arising from the participant's participation.
- ☐ I understand and fully accept the terms of this Waiver and Release, waiving substantial rights.
- I am responsible for the participant's personal medical insurance and any medical costs incurred.
- In a medical emergency, Shockwave Tennis will call EMS if the parent/guardian cannot be reached.
- ☐ I voluntarily agree to this Waiver and Release.
- ☐ If the participant is under 18 years old, I, as the parent/guardian, consent to their release as provided in this Waiver and Release.

### **MEDIA/PHOTO WAIVER**

I authorize Shockwave Tennis Academy to capture and utilize photographs, videotapes, and/or film of myself or my child participating in the Program for various purposes, including exhibitions, displays, publications, commercials, and advertising. I understand that the participant's name and identity will remain confidential. If I choose not to authorize photography or videography, I will notify Shockwave Tennis via email.

#### **ACKNOWLEDGE**

Date (mm/dd/yy)

I confirm that I have read and understood all the provisions and information provided, including Participant's Information, Tennis Program, Calendar & Schedules, Camp Locations, Make-ups, Participant Guidelines, Parent Guidelines, Camp Rates & Payments, Waiver & Release, and Media/Photo Waiver, and agree to comply with them.

Parent's/Guardian's Signature				
Printed name				