

# WOLVERINE TENNIS CAMP



## Instructors:

- Clear Brook High School's Head Coach Jarrett Smith
- Clear Brook Coach Laura Atkins
- Former Clear Brook High School players
- Other Experienced Tennis professionals.

Sign up @

[clearbrooktennis.org/  
camps](http://clearbrooktennis.org/camps)

**\$100 for 1 week of camp, \$180 for 2, \$255 for 3, \$320 for 4, \$370 for all 5**

**Or mail form and checks to:  
Jarrett Smith  
1055 FM 646 #1035  
Dickinson, TX, 77539**

**Follow Clear Brook Tennis on Twitter  
@ClearBrook10S**

**This camp is intended for Varsity/Junior varsity level players. If your student has never taken a lesson or has played tennis for less than a year, we recommend entering the Wolverine beginner camp. More information can be found at <http://clearbrooktennis.org>**

Tennis Camp \$100

- 8:00 - 11:00; Monday - Thursday
- Designed for the tournament player in mind (high school or qualified players)
- Advanced drills
- Match Play
- Conditioning

Session 1

June 20-23

Session 2

June 27-30

Session 3

July 18-21

Session 4

July 25-28

Session 5

August 1-4

Name \_\_\_\_\_

Phone # \_\_\_\_\_

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

Parents Name \_\_\_\_\_

Grade for 16-17 School Year \_\_\_\_\_

Playing Level (intermediate or advanced) \_\_\_\_\_

Please note, there is a beginner camp that will be separate from the Wolverine Tennis camp. If your student has never taken a lesson before, that should be the camp for them.

Please check camp or camps attending:

**\$100 for 1 week of camp, \$180 for 2, \$255 for 3, \$320 for 4, \$370 for all**

\_\_\_\_\_ Camp 1      June 20-23

\_\_\_\_\_ Camp 2      June 27-30

\_\_\_\_\_ Camp 3      July 18-21

\_\_\_\_\_ Camp 4      July 25-28

\_\_\_\_\_ Camp 5      August 1-4

Total amount paid \_\_\_\_\_ (Checks payable to Jarrett Smith)

Send form to:      Jarrett Smith  
                            1055 FM 646 #1035  
                            Dickinson, Tx  
                            77539

**Please Read and Sign below**

I hereby authorize the directors of the Clear Brook H.S. athletic camp to act for me in accordance with their judgment in any emergency requiring medical attention.

I further waive and release Clear Brook H.S. athletic camps from liability for any damages from injuries and/or illness sustained at the Clear Brook athletic camps. I know of no mental or physical conditions that might affect my child's ability to safely participate in the camp. I have included a copy of my child's latest physical and have notified the camp instructors of any physical ailments my child has experienced of which they should be aware.

Parent or Guardian Signature:

\_\_\_\_\_