



# 1st-7th graders *Junior Program FALL 2018 Workouts*

*For (beginner) Players moving up to Team Level (match play level) Juan Bracho Tennis Academy*

## **FALL 2018 Dates of clinics:**

### **Sundays:**

September 16  
September 23  
September 30  
October 7  
October 14  
October 21  
October 28  
November 04

Rain make ups at the end if needed

Workout Director: Juan Bracho. Bracho's style of teaching is unique and focuses entirely on increasing the player's self esteem through the acquisition of tennis knowledge and skill. He encourages a player to acquire a graphite racquet with Gripllock technology (1 FREE for each player)

Players need to show up on the court on time with proper racquet and water jug. No sodas please!!!

**This is a program designed to advance players from total beginner level to match play level.**

Not everyone advances in the seasonal 8 weeks cycle.... many times a player needs several cycles before he or she matures into a match player.

For payment you can Print, Fill it out, Take a picture of form and text it to 832-483-4279

and pay with Zelle to 832-483-4279

or you can write your cc info below.

Note: Registration is *subject to confirmation based on space. (16 players max)*

LOCATION: Feld Park Tennis Courts on Ave. B

WORKOUT TIMES AND DAYS:

*(September thru November)*

**FOR PLAYERS THAT ATTEND SCHOOL IN THE 1ST THRU 7TH GRADES:**

**INSTRUCTION AND DRILLS:** SUNDAYS FROM 2:30 TO 4:00 at Feld park courts

FEES: Junior program 1 - 7 grade: \$279

WEBSITE: [www.tennisbracho.com](http://www.tennisbracho.com)

phone number: 832-483-4279

e-mail: [jbta@aol.com](mailto:jbta@aol.com)

Please note: No Refunds once season starts

PLAYER'S NAME: \_\_\_\_\_ D.O.B. \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_ PARENT'S NAMES: \_\_\_\_\_

CC# \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

### PARENTAL CONSENT AND MEDIA RELEASE:

I (We), the undersigned, am (are) the natural parent (s) or guardian/s of the minor child or children, "minor/s" as herein named, and as such, do hereby consent to the minor/s named herein participation in the City of Bellaire sanctioned or sponsored activities as described in the application to which this consent is attached.

I (We) acknowledge on behalf of the minor/s named that: I, (We) have made full inquiry with the sponsors, teachers, and or instructors as to the nature of the program;

I (we) have permitted and authorized named minor/s to participate in the activity or program to which this consent is attached; and I, (We) acknowledge on behalf of the minor/s that participation in the program and activity necessarily involves risk, including risk of injury, and believe and understand that the participation of the minor/s as named here is justified and proper.

MEDIA RELEASE: I consent to the fact that many workouts are photographed and /or recorded and that such media remains property of JBTA.

DATE: \_\_\_\_\_

X Signature of parent or guardian