

# Grimes Parks & Recreation De

Telephone: (515) 986-2143

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www.grimesiowa.gov

# CITY OF GRIMES



## Youth Tennis Instructional Clinic

### Program Description:

Sessions 1-3 will be taught by Steve Harper, Assistant Coach at Urbandale HS. Session 4 will be taught by Andy Grove of Grimes. The clinics are designed for participants interested in learning the game of tennis in a fun way. Each clinic member needs to bring their own tennis racquet and water bottle. *Max of 8 kids per time slot.* All rainout make-ups will be on Fridays.

**Who:** For Ages 6 and Up

**Where:** Grimes Sports Complex Tennis Courts

**Dates:** Session 1 w/ Harper: Monday, May 21 – Thursday, May 24  
Session 2 w/ Harper: Monday, June 11 – Thursday, June 14  
Session 3 w/ Harper: Monday, June 25 – Thursday, June 28  
Session 4 w/ Grove: Monday, July 23 – Thursday, July 26



**Time:** **Session 1:**  
Ages 6-8: 5:30-6:20pm  
Ages 9-11: 6:30pm - 7:20pm

**Sessions 2 & 3:**  
Ages 6-8: 8-8:50am  
Ages 9-11: 9-9:50am  
Ages 12-15: 10-10:50am

**Session 4:**  
Ages 6-8: 8-8:50am  
Ages 9-11: 9-9:50am

**Questions:** Contact Brett Barber, Grimes Parks & Recreation Director at [bbarber@ci.grimes.ia.us](mailto:bbarber@ci.grimes.ia.us).

**To Register:** Register ONLINE, OR bring in registration to the GCC, OR mail to 410 SE Main St. Grimes, IA 50111

**Cost:** \$25 per child per session

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### 2012 "Tennis Instructional Clinic" Registration Form

PARTICIPANT'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

PARENT/GUARDIAN'S NAME: \_\_\_\_\_ I can assist: YES NO

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

Please Circle:      Session 1                      Session 2                      Session 3                      Session 4

Please Circle:                      Ages 6-8                      Ages 9-11                      Ages 12-15

Cost is \$25 per person.

### Release and Indemnification Agreement:

I hereby request that you accept my child's application for registration in this Grimes Park and Recreation Department program. With consideration of your acceptance of my child, I hereby release the City of Grimes, its employees, and the coaches and volunteers associated with this program from all claims which may arise in the event my child is injured in an accident that occurs while he or she is participating in this program. I further agree to indemnify the City of Grimes, its employees, and the coaches and volunteers associated with this program for any claim, which may hereafter be presented on behalf of my child as a result of any such injuries. I hereby acknowledge that it is my responsibility, not the responsibility of the City of Grimes, to provide medical insurance coverage in the event I desire to have medical insurance coverage for my child while he or she participates in this particular activity. I will also allow pictures of my child during this program to be used only for the marketing purposes of future Grimes Parks and Recreation programs.

Signature of Parent or Guardian

Date