



2024 Junior Tennis Camps

The York Golf and Tennis Club – Kris Elien, Tennis Director
62 Organug Road, York ME 0 207.363.4752 www.YorkGolfandTennis.com

Summer Camps

Camps run weekly Tuesday, Wednesday, Thursday, 11:30am-3:00pm

Please select YGT Camp for Ages 6-10
Age group: YGT Camp for Ages 11-17

Sessions:

		Member:	Non-Member:
Session 1:	6/18 - 6/20	\$192 <input type="checkbox"/>	\$217 <input type="checkbox"/>
Session 2:	6/25 - 6/27	\$192 <input type="checkbox"/>	\$217 <input type="checkbox"/>
Session 3:	7/2 - 7/4	\$192 <input type="checkbox"/>	\$217 <input type="checkbox"/>
Session 4:	7/9 - 7/11	\$192 <input type="checkbox"/>	\$217 <input type="checkbox"/>
Session 5:	7/16 - 7/18	\$192 <input type="checkbox"/>	\$217 <input type="checkbox"/>
Session 6:	7/23 - 7/25	\$192 <input type="checkbox"/>	\$217 <input type="checkbox"/>
Session 7:	7/30 - 8/1	\$192 <input type="checkbox"/>	\$217 <input type="checkbox"/>
Session 8:	8/6 - 8/8	\$192 <input type="checkbox"/>	\$217 <input type="checkbox"/>
Session 9:	8/13 - 8/15	\$192 <input type="checkbox"/>	\$217 <input type="checkbox"/>

Lunch must be prepaid \$30 per week x _____ weeks Total \$ _____

Total Camp Plus Lunch:

Payment Information

Member Number: Checks are payable to NLTD.
Payment may be mailed to 382 Bolt Hill Road, Eliot, ME 03903
Credit card information Number: Exp:

Participant Name: Birthdate: Age: Level of play:

Health or Other Concerns:

Parent/Guardian: Phone: Email:

Mailing Address:

Waiver Agreement: I waive, release, and forever discharge NLTD, YGTC, the staff, or representatives from all rights and claims for damages, injuries, or illness which may be sustained or occur during participation of all clinics, camps programs, and tennis activities.

Signed: Date: