

MADISON RACQUET & SWIM CHUR

Ava Esposito 18 and Under Current ranking #16 in the country

www.tcsscamp.com

email: info@tcsscamp.com

MRSC (203) 245-9444

## **2025 ATP Shoreline Tennis Academy**



Do you have what it takes? Dates: 12 weeks, June 09 to August 22. Players sign up by the week. The ATP Program will offer a 1/2 day week long tennis camp. Players will be pushed to their limits with high performance style drilling and play. In addition to drilling, each week players will participate in UTR match play. UTR Tournaments will also be offered on Wednesdays & Thursdays to the public. All registration for match play and tournaments will be offered through the UTR website. There will be limited space for each age group and ability level. Sign up soon to reserve your spot. Space is limited sign-up today. We will offer Swimming at MRSC from 12-2 this year for the Players. If you have any questions please call Rick Fay (203) 804-7661

Typical Daily Schedule	Ages 10-16	Price
8:00–9:00 AM	Early Drop Off (Games)	Included
9:00-10:00 AM	Dynamic Warm-Up, Stroke Technique	
10:00-11:00 AM	Consistency Drills	
11:00-12:00 PM	Strategy & Play Based Drills,	
12:00 - 2:00 PM	Swimming (optional)	\$100
1:00-3:00 PM	UTR Match Play & Tournaments (signup weekly at utr.com)	
	Daily Drop In Fee	\$85
	Half Day 9:00-12:00 (Drop Off 8-9 am)	\$390

The ATP Program, which originated at the Madison Racquet & Swim Club, has produced several highly ranked tennis players during it's 17 years. Past and present players have ranked among New England's finest. As our competitive players strive to play in college, we make it our priority to help them achieve their goals. We are pleased to announce that our partner, Universal Tennis Rating (UTR) will further help us in this effort. Monday, Tuesday, and Wednesday afternoons we will have match play that will count towards UTR ratings. We look forward to seeing you for another great Summer.

10 Weekly Sessions Monday - Friday June 09 - Aug 29 10% discount for 3 or more weeks, includes siblings!



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# **Summer 2025 ATP Shoreline Academy Sports Camp Application**

## **Parent's Information**

#### **Student's Information**

Parent's First Name:		First Name:					
Parent's Last Name:		Last Name:					
Pick up Name:		Date of Birth: / / Age:					
Address:		Gender: Male  Female  Grade:					
Town:		Medical Condition: Yes No (If Yes please fill out					
Zip:		Emergency Contact:					
Email:		Emergency Phone:					
Home Phone:	Work:	Cell:					

Check the sessions you would like to sign-up for. In the case of bad weather all classes will be moved to the Gym. There will be no camp July 4th. We will deduct 20%.

### 10% discount for 3 or more weeks, includes siblings!

Sessions	1	2	3	4	5	6	7	8	9		10	11	12		
Weeks Available	6/09 🔲	6/16	6/23 🔲	*6/30 🔲	7/7 🔲	7/14 🔲	7/21 🔲	7/28	8/4	] 8/	11 🔲	8/18 🔲	8/25 🔲		
Typical Daily Schedule	Ages 10-16						F	Price			Additional Information Please fill out all of the man- datory State forms. A deposit of 25% of the program fee is				
8:00 – 9:00 AM		Early Drop Off (Games)							luded		place	required to register and hold a place in each session. Full			
9:00 - 10:00 AM		Dynamic Warm-Up, Stroke Technique									amount of the weekly pro- gram fee is due 2 weeks prid				
10:00 - 11:00 AM			С	onsistency	Drills						to the start of each weekly session. Payments are re- fundable minus a cancellation				
11:00-12:00 PM		Strategy & Play Based Drills									fee of 10% of the cost of the program for cancellations 2				
12:00 - 2 PM			Sw	imming (o	ptional)			\$	100	The second secon					
1:00-4:00 PM	UTR Match Play & Tournaments (signup weekly at utr.com)						Paic thr	separately ough UTR		box M fill out	box Medical Condition, please fill out the medical form. Please check the weeks you				
	Weekly 1/2 Day 9 - 12 PM						\$	390		would like to sign up for. Please call Dallas if you have					
	Daily Dr	op In Ra	tes: (Pleas	e Check Boxes	) M [	] Т 🔲 W	Th [	]F	\$85		any questions so we can assist you. (203) 245-9444 or				
Fees	Total for the Week					eek			email Info@	us tcsscamp.c	com				
<b>Make Checks Payable to:</b> Madison Racquet & Swim Club P.O. Box 508 Madison CT 06443			ox Payr	Payment Information Check: Check #											
			Cred	Credit Card Type MC Visa Exp. Date / /											
Notes:				Cred	Credit Card Number: CVV#										
					Amo	Amount paid: (25% Deposit Due)									