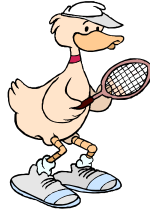




presents

“In The Park” tennis with “Ger” 2007



(a tribute tennis camp to the late Dalles Tennis Pro & U of O tennis alum...Gerry Farmer)



The USA Team Tennis Rallyball format is designed to allow kids of all ages and levels to play the game of tennis in an easy and fun way. They will learn the game, be on a team with their friends, and have a fun time! No experience necessary!

Teams are now being formed in the following age divisions:

8 & Under (grades 1-2) * 10 & Under (grades 3-4) * 15 & Under (grades 5-8) * 15 & over (grade 9-12)

Teams will consist of 4-6 players each. Players will learn tennis skills during a one-hour practice session each day with a tennis instructor. All teams will have match play for ½ hour within their age division, and during our breaks they'll have the option to listen/read Bible based parables. Featuring John Wooden's 'Pyramid of Success' value system training too!

To **PRE-REGISTER**, please call Stewart Bartlett (**ISM Tennis Director @ 503-702-4362**) or LaShawn Chaney (**ISM Executive Director @ 503-849-5828**) to learn more about this tennis clinic. Registration, Permission/Liability forms are required before any child may participate.

Where: Irving Park tennis courts - **a Portland Public Park*

When: July 30th – Aug. 3rd (barbeque on last day!!)

Time: 4:30pm to 7:30pm (exception last day extended to 8:30pm for barbeque)

Cost: **FREE for all** (donations will be accepted and are fully tax deductible)

- Racquets are available for participants use during play thanks to the generous support from Players Tennis & Prince, and Christ Episcopal Church Outreach.



****Innercity Sports Ministries (ISM) is a 501c (3) non-profit and Christian based sports program
www.isportsm.org**

(See Registration/Permission forms attached)
Rallyball tennis team registration & permission form
ISM & USA Team Tennis

Child's Name: _____ **Grade:** _____ **Age:** _____

DOB: _____

School Name: _____

Home address: _____

Home phone: _____ **Emergency phone #:** _____

Parent/Guardian

name(s): _____

PARENTS/GUARDIAN: CHECK HERE IF YOU CAN HELP Volunteer: _____

Permission statement:

My child, _____, has my permission to attend "*In the Park with Ger*" tennis clinic at Irving Park. Also, permission is given to enter their name into the USTA database as participants in USA team tennis. This is specifically for tracking purposes. Photographs may also be taken by staff of my child for the sole purpose of introducing ISM's programming to promote future participation and involvement. ISM will not be held responsible for any injury incurred during my child's participation while participating in this tennis clinic.

Parent/Guardian approval: _____

Health Concerns: Allergys _____ or

Health Limitations _____

Parents/Guardians are responsible for their child's transportation to and from the park where our clinic is held. Name of authorized adult who will pick up and drop off: _____

**For any questions or inquiries about the ISM tennis clinic contact:
Stewart Bartlett @ 503-702-4362 or LaShawn Chaney @ 503-849-5828**
