

# Camp Location

Lake Murray Tennis Club  
7001 Park Ridge  
San Diego, CA 92119  
Phone: 619-469-3232

**Tennis Fun, Fitness, Skills & Competition**



Director Coach Karen Ronney  
Email: [Coach@kronney.com](mailto:Coach@kronney.com)  
Phone: 619-644-1166  
[www.karenronney.com](http://www.karenronney.com)

# 2010 Camp Dates

- ◆ June 22-25
- ◆ June 28-30 \* Mini 3 Day
- ◆ July 5-8
- ◆ July 12-15
- ◆ July 19-22
- ◆ July 26-29
- ◆ August 16-19
- ◆ August 23-25 (Mini 3 Day)

# Camp Highlights

- ◆ Instruction, Match Play & Games
- ◆ QuickStart Format for Kids 5-10
- ◆ Camp Photo and Certificate
- ◆ Playing For Prizes
- ◆ Daily Refreshing Snacks After Class

# Camp Days & Hours

- ◆ June 22-25: 11 am to 1:30pm T-Fri
- ◆ June 28-30: 11am to 1:30 (Mini 3 Day) M-W
- ◆ July 5-8: 11am to 1:30pm M-Th
- ◆ July 12-15: 11am to 1:30pm M-Th
- ◆ July 19-22: 11am to 1:30pm M-Th
- ◆ July 26 to 29: 11am to 1:30pm M-Th
- ◆ Aug 16-19: 11am to 1:30pm M-Th
- ◆ Aug 23-25: 11am to 1:30pm (Mini 3 Day) M-W

# Camp Fees & Costs

- ◆ 10 Hours of Instruction in 4-Day Camps \$150
- ◆ 7.5 Hours of Instruction in Mini 3-Day Camp \$100

# 6 Week Tennis Classes All Levels In June-July Including QuickStart For Kids Ages 5 to 10

- ◆ Classes begin June 22 through July 27
- ◆ Tues and Thursdays ( No class July 1— holiday)
- ◆ Class times start at 4pm
- ◆ Contact Coach Karen for more info

# Mission Trails Tennis Academy

Lake Murray Tennis Club

# SUMMER TENNIS CAMPS 2010



For Kids Ages 5  
to High School

Director Coach Karen Ronney  
Email: [Coach@kronney.com](mailto:Coach@kronney.com)  
[www.karenronney.com](http://www.karenronney.com)



## About Coach Karen Ronney

Coach Karen is an award-winning national coach and author, USPTA and PTR tennis professional, a National USTA RCW and QuickStart trainer, the Patrick Henry High girls' tennis coach, a motivational



speaker, public school educator and a parent. A former women's pro tour player and NCAA All-Conference pick, she has combined her playing and coaching skills to help others learn the game of tennis. She was recognized as the 2009 National Youth Sports Double-Goal Coach of the Year by the Positive Coaching Alliance, and she received U.S. Professional Tennis Association's 2009 Community Service Award for the San Diego Division. Karen has been coaching tennis for over 25 years and is the Camp Director of Mission Trails Tennis Academy since 2006.

## Things to Bring!



- ◆ Completed registration form
- ◆ Sunscreen, hat or visor, and tennis racket
- ◆ Water bottle or jug. Fountains for refill are on site
- ◆ Non-marking tennis shoes (not black-soled running shoes. We recently resurfaced our courts.)
- ◆ White or light colored comfortable clothing
- ◆ Snack if desired



## Liability Release

**LIABILITY RELEASE:** Participant Initial \_\_\_\_ Parent/Guardian Initial \_\_\_\_

I agree to permit my child (print name): \_\_\_\_\_ to participate in any way in any "Activity" at Mission Trails Tennis Academy (MTTA) I, for myself, as Parent/Guardian of Participant, and/or as Participant, including my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) any/all athletic activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis, and/or death ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the "releasees" named below; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I fully accept and assume all such Risks and all responsibility for losses, costs, and damages I incur as a result of my participation or that of the Participant's participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE MTTA as well as the officers, directors, agents, employees and assigns of each, and the BTC coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, and any other party indemnified and held harmless by BTC, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Release's, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

**MEDICAL RELEASE:** Participant Initial \_\_\_\_ Parent/Guardian Initial \_\_\_\_ I, grant to MTTA to act as guardians/spokesmen in granting permission for emergency treatment/hospitalization, if necessary for the Participant, en route to or from or at the site of any "Activity" or hospital or other medical facility. I understand that should a health emergency arise, I will be attempted to be notified, but that if I cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel is authorized. I further understand that I will be responsible for payment of any such medical procedures.

**PHOTO/VIDEO RELEASE:** Participant Initial \_\_\_\_ Parent/Guardian Initial \_\_\_\_

I hereby authorize MTTA to allow the reproduction, dissemination, and/or publication of my name and likeness for media coverage, public relations, or any other purpose which may involve the use of photographs, films, and/or video tape recording. This is to be done in conjunction with my participation in an "Activity" or event and I understand and agree that I may neither pay a fee to receive individual promotional consideration from my participation, nor will I receive any payment for the possible commercial use of my name or likeness.

I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that any portion of this agreement is held invalid the balance, notwithstanding, shall continue in full force and effect.

_____ PRINTED NAME OF PARTICIPANT	_____ SIGNATURE	_____ DATE
_____ PRINTED NAME OF PAREN/GUARDIAN	_____ SIGNATURE	_____ DATE

## Registration

Camper's Name \_\_\_\_\_ M  F

Age: \_\_\_\_\_ Best Phone # \_\_\_\_\_

Other Home or Cell#: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

School: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Level of Play: Beg  Int  Adv

Parent or Guardian Name: \_\_\_\_\_

Work or Cell Phone: \_\_\_\_\_

Medical Alert or Special Info: \_\_\_\_\_

## Circle Weeks Attending

- ◆ June 22-25
- ◆ June 28-30\* Mini 3 Day Camp
- ◆ July 5-8
- ◆ July 12-15
- ◆ July 19-22
- ◆ July 26-29
- ◆ August 16-19
- ◆ August 23-25 \*Mini 3 Day



Cash or checks payable to :

Karen Ronney  
6422 Casselberry Way  
San Diego, CA 92119

- ◆ 10 Hours of Instruction- 4-Day Camps \$150
- ◆ 7.5 Hours of Instruction- 3-Day Mini Camp \$100
- ◆ Ask About Sibling and Multi-Camp Discounts