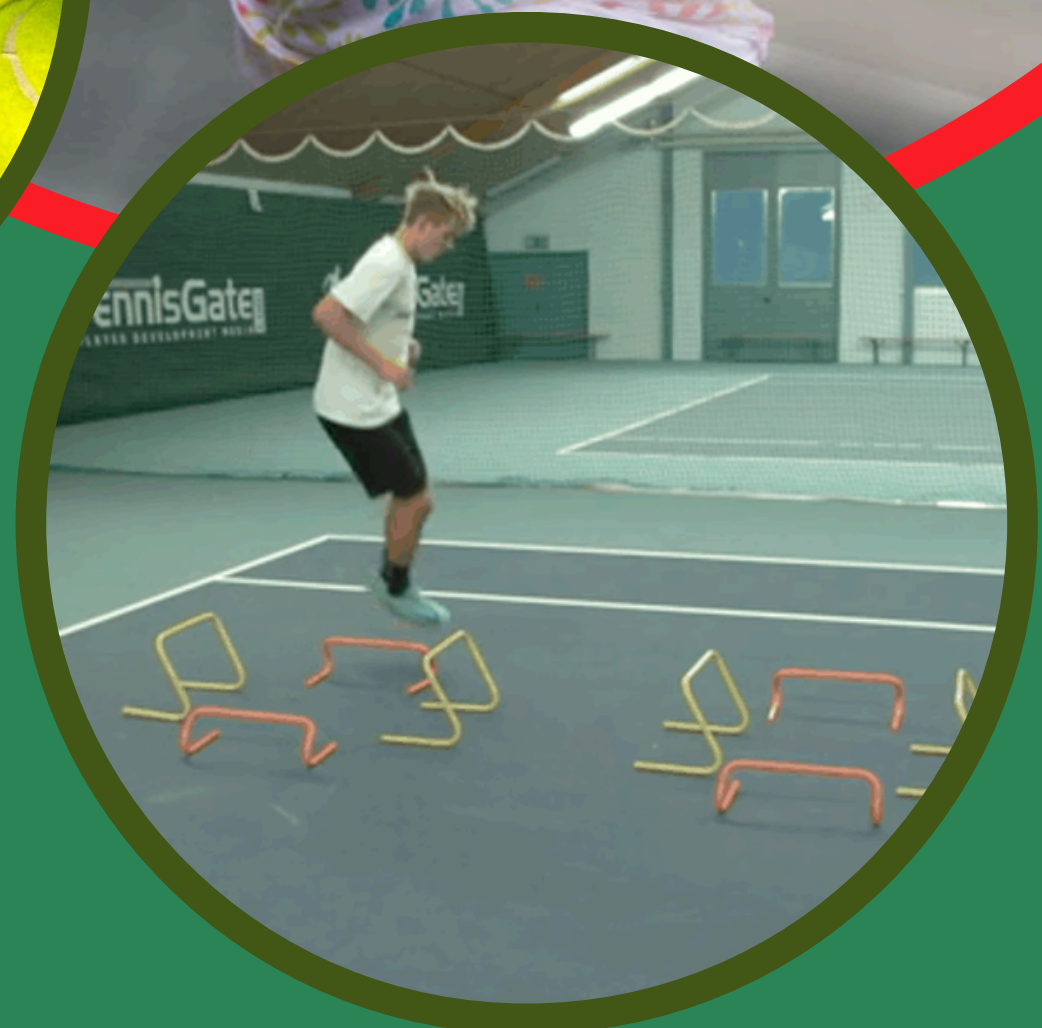


2025 TENFIT Summer Camp @



Ages 5 - 12

OPEN TO NON MEMBERS!



WELL ROUNDED CAMP EXPERIENCE

SMALL GROUP SIZES

- Progressive tennis coaching techniques and equipment
- Multi-sport and fitness environment
- Shaded areas and rest zones for all campers
- Progress and Activity Report Booklets provided
- Safe and fun camp experience following all guidelines
- Art & Crafts programs

Ranked #1
Tennis Camp

BLOGTO.COM

Experienced
Adult Certified
Tennis Canada

COACHING STAFF



TEN•FIT
For A Healthy Lifestyle, Come For A Hit And Stay Fit !!

CARDIO TENNIS
HEART PUMPING FITNESS

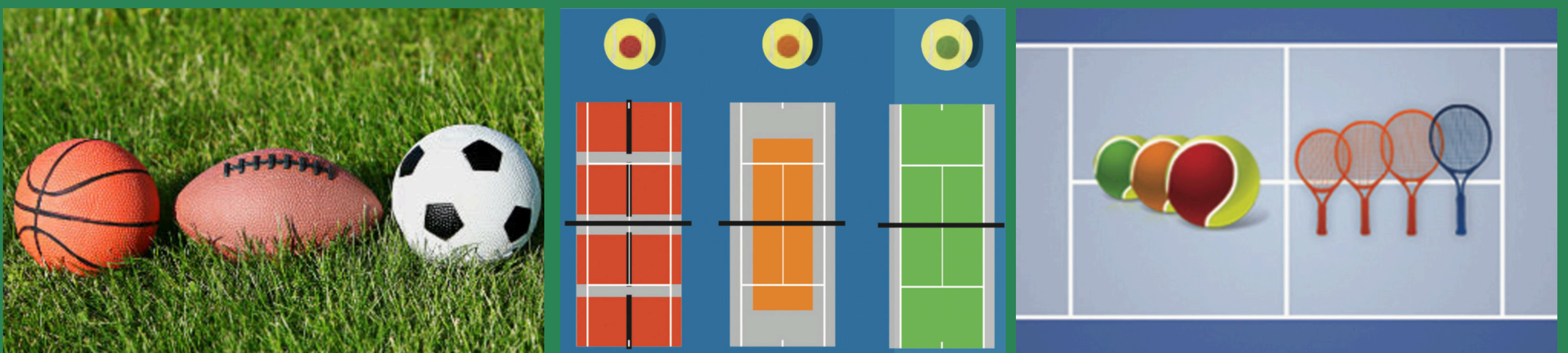
Wilson

200 Lytton Boulevard
Toronto, ON M4R 1L4

Camp Schedule

<u>JUNE</u> JUNE 16-20 ● WEEK 1 - MORNING ONLY JUNE 23-27 ● WEEK 2 - MORNING ONLY		WEEK 1 - HALF DAY - \$287.61+ HST - \$325 WEEK 2 - HALF DAY - \$287.61 + HST - \$325
<u>JULY</u> JULY 7-11 ● WEEK 3 JULY 14-18 ● WEEK 4 JULY 21-25 ● WEEK 5 JULY 28-AUG 1 ● WEEK 6		HALF DAY - \$287.61 + HST - \$325 FULL DAY NO LUNCH - \$477.88 + HST - \$540 FULL DAY WITH LUNCH - \$522.12 + HST - \$590
<u>AUGUST</u> 4 day week – Tuesday-Friday AUG 5-8 ● WEEK 7		HALF DAY - \$230.09 + HST - \$260 FULL DAY NO LUNCH - \$380.53 + HST - \$430 FULL DAY WITH LUNCH - \$415.93 + HST - \$470
<u>AUGUST</u> AUG 11-15 ● WEEK 8 AUG 18-22 ● WEEK 9 AUG 25-29 ● WEEK 10		HALF DAY - \$287.61 + HST - \$325 FULL DAY NO LUNCH - \$477.88 + HST - \$540 FULL DAY WITH LUNCH - \$522.12 + HST - \$590
HALF DAY - 9:00am-Noon <u>OR</u> 1:00pm-4:00pm (please choose) FULL DAY CAMP 9:00am-4:00pm → CAMPER DROP OFF STARTS AT 8:45AM OR 12:45PM – CAMP STARTS ON COURT AT 9:00AM OR 1:00PM → EXTENDED CARE IS AVAILABLE – PLEASE CONTACT MARK CRONE FOR PRICING		

MULTISPORT CAMP



FOLLOW THE TENFIT PATHWAY!



200 Lytton Boulevard
Toronto, ON M4R 1L4

2025 REGISTRATION FORM

Please complete the following registration form.

Last Name: _____ First Name: _____

Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Cell/Office Phone: _____

E-mail Address: _____

Medical Condition / Health Concerns / Allergies:

Health Card Number: _____

Name of Parent of Guardian(s) (Junior Program Only): _____

Date of Birth: Day _____ / Month _____ / Year _____ / Age _____

Gender (Please Circle) Male / Female

In case of emergency please contact: _____ Relation: _____

Phone Number: _____

WEEK (please circle): WEEK 1 | WEEK 2 | WEEK 3 | WEEK 4 | WEEK 5 | WEEK 6 | WEEK 7 | WEEK 8 | WEEK 9 | WEEK 10

SESSION (please circle): MORNING 9:00AM-NOON / AFTERNOON 1:00PM-4:00PM / FULL DAY WITH LUNCH / FULL DAY NO LUNCH

TOTAL AMOUNT \$ _____

PLEASE EMAIL COMPLETED FORM TO: mark@northtorontotennis.com

E-TRANSFER PAYMENTS TO: mark@northtorontotennis.com

Waiver:

I, the undersigned, submit that my child is physically fit to participate in strenuous athletic activity and hereby waive and release Tenfit, their affiliates, employees, directors, facilities and all other related parties of any and all liability or responsibility in the case that my child should experience illness or injury during his/her participation in the program.

I hereby authorize the staff of Tenfit to act accordingly to their best judgement in any emergency requiring medial attention. I understand that I am solely responsible for any such medical expense over and above OHIP coverage. My signature on this waiver also indicates that the above named is covered by my personal insurance.

(Please check) I have read and understand the 2024 Rules and rain policy.

Applicant Signature: _____

Parent Signature: _____ Date: _____