

JACK SCHORE TRAINING



INVITATIONAL GOLD PROGRAM

at Regency Sport&Health

PLAY SETS. DRILL. TRAIN.

Training by Jack Schore and Damiisa Robinson

Jack Schore, one of the most successful competitive coaches in the nation, will head the instructive group in one of our nations most intensive championship training groups.

During each group, every player will play a competitive set while being coached in tactics, drill in game situations and train in our tennis specific exercise program.

Dates: November 3, 2008 - May 3, 2009

Times:
Saturdays: 4:00-6:30pm
Sundays: 4:00-6:00pm
Mondays: 4:00-6:30pm
Tuesdays: 5:00-7:30pm
Wednesdays: 4:00-6:30pm
Thursdays: 5:00-7:30pm

Member Cost: 1 Day: \$1,320 2 Days: \$2,400 3 Days: \$3,600 4 Days: \$4,800

Nonmember Cost: 1 Day: \$1,650 2 Days: \$3,000 3 Days: \$4,500 4 Days: \$6,000

SPECIAL GOLD OFFER: Get one day FREE when you register for 2 or more days.

Limited to 18 players. Singles set each day. Classes will not be held Nov. 26-30 or Dec. 23-Jan. 2. For more information please contact Vicki Datlow at 703-556-6550, ext. 222 or email her at vdatlow@sportandhealth.com



JACK SCHORE TENNIS

www.jackschoretennis.com

prince[®]

princesports.com



Jack Schore

Jack Schore Invitational Gold Program Registration Form

Parent's Name _____

Player's Name _____ Age _____

Player's Birth Date _____ Player's Shirt Size _____

Address _____

Phone # (h) _____ (c) _____

E-mail address _____

Sport&Health Member# _____ Nonmember

Type of Payment: Cash Check MasterCard

Visa AMEX Discover

Card #: _____ Exp Date: _____

Signature: _____ Date: _____

RELEASE: In consideration of making facilities and/or services available, I do hereby for and on behalf of myself and my heirs and legal representatives, release and forever discharge Sport&Health and Jack Schore Tennis LLC, its owners, manager and representatives from any and all claims and demands of every kind, nature and character which I may have or hereafter acquire for any and all damages or losses which may be suffered or sustained by me in connection with my activity and all such claims are hereby waived and released.

Parent's Signature: _____

Date: _____

sport&health

REGENCY

sportandhealth.com

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703-556-6550