

SUMMER YOUTH TABLE TENNIS

WHEN

July 10-Aug 25, 2017
2pm – 6pm

WHERE

**AACCT Table Tennis
Center**

133-25 37th Avenue, Flushing, NY 11354

“TRAIN LIKE THE BEST!”

REGISTER ONLINE AT
WWW.AYTTO.ORG (EVENTS TAB)



AGES 6-18 YRS

**2 SESSIONS
DAILY**

**Beginners 2-4pm
Intermediate/
Advance 4-6pm**

TUITION

\$25 Daily

\$115 Weekly

**Limited space; Register by
July 1 to receive 10% off**

COACHES

Sydney Christophe

- **ITTF Certified Coach
and Instructor**
- **Former Caribbean
Champion**

Edmund SUEN

**ITTF Level 1 Coach/USATT
State Coach**

Other Qualified Coaches

CONTACT

Email:

sydchris2000@yahoo.com

Mobile: 347-564-4142

Web: www.aytto.org

WHY ENROLL YOUR CHILD?

- **TABLE TENNIS IS AN OLYMPIC SPORT SINCE 1988**
- **LEARN SKILLS THAT LAST A LIFE-TIME!**
- **MEET NEW FRIENDS**
- **PLAY IN A GREAT VENUE**

LEARN:

- **FOOTWORK**
- **SERVICE**
- **FOREHAND & BACKHAND**
- **MATCH PREPARATION**
- **LOOPS, TACTICS, AND MORE!**

CAMP INCLUDES:

- **WORLD CLASS TABLE TENNIS INSTRUCTIONS**
- **TOURNAMENTS (SINGLES, DOUBLES, TEAMS, AND MORE!**
- **SKILL AND TEAM BUILDING GAMES**
- **LIGHT SNACKS/BEVERAGES**
- **DRILLS TO DEVELOP COORDINATION AND MOVEMENT SKILLS**

APPLICATION

First Name _____ Last Name _____

Street Address _____ City _____

State _____ Zip _____ Phone (_____) _____ - _____

Emergency Contact Name _____ Phone (_____) _____

Email _____@_____ Age _____

Date of Birth (MM/DD/YYYY) ____/____/____ USATT Rating _____

Allergies (if any) _____

Wk 1 July 10-14

Wk 2 July 17-21

Wk 3 July 24-28

Wk 4 July 31 –Aug 4

Wk 5 Aug 7-11

Wk 6 Aug 14-18

Wk 7 Aug 21-25

I hereby authorize the Director of AYTTO Table Tennis Clinic to act for me according to his best judgment in any emergency regarding medical attention. This authorization shall waive, release and absolve the **American Youth Table Tennis, AACCT Flushing** and **coaches** from any liability for the injury or illness incurred at the camp.

Print Name (Parent/Guardian) _____

Signature (Parent/Guardian) _____ Date ____/____/____

Please make checks payable to **AYTTO**



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