



THIHA HTWAR / LENNY SCHEUERMANN

THE TENNIS INSTITUTE

www.tennisinst.com

FALL 2020 WORKSHOPS

LEARN HOW THE PROS DO IT—THE WAY THE PROS LEARN IT

ADULTS — INTERMEDIATES & ADVANCED – conditioning drills, strategy, learn topspin, underspin, other ‘special’ shots, maximize your style advantages. Well supervised – no more than 6 players on court.

JUNIORS — BEGINNERS – learn the fundamentals and build a sound foundation for the future.

INTERMEDIATES & ADVANCED – receive the identical instruction as the adult workshop.

CLASS SCHEDULE*

*Additional times and/or age groups to be arranged with head professional upon request.

DAY	HOURS	LEVEL	DAY	HOURS	LEVEL
ADULTS.....	MON9:30-11:30 am.....	2.5 - 3.0	JUNIORS 6-9 YRS.	SAT...10-11 am.....	BEG. / INT. / ADV.
ADULTS.....	TUE12-2 pm	INT. / ADV.	JUNIORS 10-12 YRS	SAT11-noon....	BEG. / INT. / ADV.
ADULTS.....	WED.....12-2 pm.....	INT. / ADV.	JUNIORS 10-18 YRS....	MON 4-6 pm	INT. /ADV.
ADULTS	FRI.....12-2 pm	INT. / ADV.	JUNIORS 10-18 YRS.....	WED 4-6 pm	INT. /ADV.
ADULTS	SAT3-5 pm	INT. / ADV.	JUNIORS 10-18 YRS	FRI 4-6 pm	INT. /ADV.
JUNIORS 6-12 YRS	MON.....4-5 pm.....	BEG./INT./ADV.	JUNIORS 13-18 YRS.....	SAT 1-3 pm	INT. /ADV.
JUNIORS 6-12 YRS	WED.....4-5 pm	BEG./INT./ADV.			
JUNIORS 6-12 YRS.....	FRI.....4-5 pm	BEG./INT./ADV.			

12 & under no membership required.

Coppermine Racquet & Fitness

FILL IN & RETURN REGISTRATION FORM BELOW.

8-WEEK WORKSHOPS

1 Hour Class — 1 Day Per Week . . . \$259

2 Hour Class — 1 Day Per Week . . . \$449 (members) \$509 (non-members 13+)

MONDAY CLINICS —Sept 14- Nov 2

TUESDAY CLINICS —Sept 8- Oct 27

WEDNESDAY CLINICS — Sept 9- Oct 28

FRIDAY CLINICS—Sept 11-Oct 30

SATURDAY CLINICS —Sept 12-Oct 31

REGISTRATION FORM ~ ENROLL TODAY! SPACE IS LIMITED!

Please Register me for the following:

Day(s) of Week _____ Class Times _____ Adult _____ Junior (age; dob) _____

Beginner _____ Intermediate _____ Advanced _____

Parent's Name _____ Name _____

Address _____ Zip _____

E-mail _____ Phone (_____) _____

Credit Card Information: Mastercard Visa Exp. Date _____ V-Code _____

Card # _____ Name On Card: _____

PLEASE INCLUDE FEE IN FULL WITH REGISTRATION FORM. MAKE CHECKS PAYABLE TO Coppermine Racquet & Fitness
AND MAIL TO: 23 Battersea Bridge Court • Lutherville, MD 21093

For Additional Information, Call (410) 337-8381 • tennisinst@comcast.net • www.tennisinst.com