



PROGRAMS FOR ALL LEVELS

Red Hot Shots (Prep - 1) 45mins

- Modified tennis program using specialized equipment for kids.
- Develops essential physical skills, such as hand-eye coordination, balance, movement and spatial awareness

Orange Hot Shots (Grades 2 - 4) 45mins

- Modified tennis program for kids
- Develops all essential skills as well as focusing on serving rallying and scoring

Green Hot Shots (Grades 5 - 7) 45mins

- Modified tennis program for kids
- Players learn the latest techniques and strategies of the game
- Exclusive rewards program covers all areas of improving your tennis

Teen Tennis (Beginner & Intermediate) 1hr

- Group coaching classes for students aged 12yrs+
- Players learn the latest techniques and strategies of the game in a relaxed, fun environment

Junior Development Squads (Intermediate/Advanced) Invitation Only - 1hr

- Players aged between 7-13yrs who are at a competitive level and looking to develop their games
- Classes developed with students of similar ability
- Includes court movement activities, on court drills and set play designed to suit class standard

Junior Fixtures Program (Orange & Green Ball)

- Tuesdays 4:00 - 5:00pm & Fridays 3:15 - 4:15pm
- Singles and Doubles match play
- Great trophies and loads of cool prizes to be won
- Open to EVERYONE!



QUEENSLAND
TENNIS SCHOOL
OF EXCELLENCE
KELVIN GROVE STATE COLLEGE



KELVIN GROVE TENNIS COACHING

ANZ HOT SHOTS TENNIS COACHING + FIXTURES SEMESTER 1, 2021

COACHING AVAILABLE
MONDAY — FRIDAY
EVERY WEEK!



BOOK IN TODAY!

All New Enrolments in Hotshots will
receive a
FREE RACQUET, CLUB HAT & HOT SHOTS SHIRT



*Celebrate the great Aussie Summer of
Tennis and play tennis now!*



Join the *Tennis Fun* at *Kelvin Grove State College* in
Semester 1 2021 with **Matchpoint Tennis Australia**

0422 859 565 | info@matchpoint.net.au

2021 KELVIN GROVE COACHING ENROLMENT FORM

Semester 1 Tennis Coaching commences from Monday 1st February 2021

Please circle the lesson/s you would like to join.

Lesson Type:	Monday	Tuesday	Wednesday	Thursday	Friday
Red Ball (5 - 7yrs)		3:15pm	3:15pm	3:15pm	
Orange Ball (8 - 9yrs)	3:15pm	3:15pm	3:15pm	3:15pm	
Green Ball (10 - 12yrs)	3:15pm	3:15pm	3:15pm	3:15pm	
Junior Fixtures (Orange & Green)		4:00pm			3:15pm
Squad (Yellow Ball)				4:00pm	

COACHING PROGRAM PRICE LIST:		TICK BOX	
RED or ORANGE or GREEN:	\$340.00 (1 x lesson per week)		
JUNIOR FIXTURES:	\$240.00		
JUNIOR DEVELOPMENT SQUAD:	\$380.00		
PRIVATE COACHING - 1 HOUR	\$80.00 per lesson		
PRIVATE COACHING - 45 MINS	\$60.00 per lesson		
PRIVATE COACHING - 30MINS	\$45.00 per lesson		
PLUS MATCHPOINT ANNUAL MEMBERSHIP FEE	\$40.00	<input checked="" type="checkbox"/>	

PLAYERS DETAILS

Players First Name: _____ Surname: _____

DOB: ___/___/___ Gender: M / F Grade: _____

Parents Name: _____ Phone: _____

Email: _____ Postcode: _____

Address: _____

Extract from Privacy Statement: During a student's attendance, the Department of Education may also collect personal information that relates to the wellbeing, protection and safety of the student. This information is protected by the Queensland Government's Information Standard 42 - Information Privacy.

STUDENT MEDICAL INFORMATION

Student's Name: _____ DOB: ___/___/___

H.GR: _____ YR: _____

IN CASE OF EMERGENCY - HOME PH: _____

PARENT/S MOBILE PH: _____ PH: _____

IF UNAVAILABLE, EMERGENCY CONTACT NAME: _____

HOME PH: _____ WORK PH: _____

CONDITIONS:	YES / NO	DETAILS:
HEART PROBLEMS	YES / NO	
RESPIRATORY eg ASTHMA	YES / NO	
ALLERGIES	YES / NO	
SUGAR DIABETES	YES / NO	
BLOOD PRESSURE	YES / NO	
RECENT OPERATIONS	YES / NO	
EPILEPSY	YES / NO	
RECENT ILLNESS	YES / NO	
PHOBIAS	YES / NO	
JOINT PROBLEMS	YES / NO	
OTHERS	YES / NO	

DATE OF LAST TETANUS BOOSTER: _____

MEDICATION CURRENTLY BEING TAKEN: Please give details of any medication being taken by the student including dosage, frequency and any doctor's instructions.

MEDICAL INSURANCE DETAILS OF MEDICARE CARDHOLDER'S:

NAME: _____ MEDICARE NUMBER: _____

ADDITIONAL HEALTH INSURANCE: YES / NO

DATE: _____ PARENT/GAURDIAN SIGNATURE: _____

Please give full details of any problems—medical or physical—which would limit your child's full participation in any activity.

Independent Student Signature: _____

