

# ProPerformance Summer Tennis Academy 2018

(Open to all Schools sponsored by Indianapolis Racquet Club)

*The goal of our camp is to provide a competitive, intimate, and efficient training environment for the three hours given each day. We want the kids to have the flexibility in the rest of their day to do whatever they want to or need to do (that might be playing practice sets on their own..). Our combination of top notch coaches; [Sule Ladipo](#), [Kevin Gill](#), [Karl Kruater](#), and [Hector Clavijo](#) will provide elite instruction with a personal touch to maximize the students experience on court.*

**Pros:** **Hector Clavijo:** Played Junior ITF college, and future tournaments, USTA High Performance Coach, PTR High Performance Coach. Certified in Spanish system of developing tennis player, Sanchez-Cassals Academy. Certified in fitness & tennis conditioning, Pat Etcheberry. LN Head Tennis Coach.

**Kevin Gill:** IRC Pro fill time pro; Three time state champion at Park Tudor High School, Achieved Top 20 national junior ranking 2000. All-American FGCU 2002, Butler University Male Athlete of the Year, 2004.

**Sule Ladipo:** Top 10 ITF Junior, Top 250 ATP Ranking, wins over Tim Henman, Magnus Norman, and Chris Woodruff. USTA High Performance Certified. 2012 – Coach/Hitting Partner Adidas Training Center. Las Vegas. Nigerian Olympic Team, Atlanta 1996. Ranked #1 Nigeria, 1992-2003.

**Karl Krauter:** IRC Pro full time pro; PTR Certified; twenty years teaching experience; athletic scholarship to Western Michigan University; played #1 singles and #1 doubles; All-MAC conference player; Three time State Champion at North Central High School.

**Dates:** **May 29 – July 27 (8 weeks) (no camp July 4th week)** (Groups won't meet **Mon. May 28<sup>th</sup>**)

All Groups will be moved indoors to IRC Dean or East if rained out when crts are available and will end ½ hr earlier (8-10:30am, 11-1:30pm)

**Location:** Lawrence North High School  
7802 Hague Rd., Indianapolis IN., 46256  
10 courts with shade, and newly constructed athletic building with water/restrooms

**Cost (All Camps):** 4 days Full Summer Rate- \$970      2 days Full Summer Rate- \$540  
4 days Weekly Rate - \$150                      Daily Rate- \$50

**Communication:** RainedOut text alerts: First text the word **proten18** to the number 84483 (proten18 is new), you will get a response saying you are now subscribing. Second to sign up for morning or afternoon alerts text 88811 for morning or 11222 for afternoon to the same number 84483 (same as last year).

**Camps:** **Tourney/Varsity Group** (Pro Admit)  
**11:00 a.m. – 2:00 p.m., Monday – Thursday**  
Group geared towards higher level tournament players and varsity high school players.

**Up & Comers** (age range from 10-14 yrs old, Pro admit)  
**8:00 a.m. – 11:00 a.m., Monday – Thursday**  
Group is geared towards players entering & playing on Middle School teams, younger tournament players and JV High School players working towards Varsity level.

**Young Champs** (age range 8-12 yr olds, Pro admit)  
**8:00 a.m.–11:00a.m., Monday–Thursday**  
Group is geared towards competitive 10 and under kids and 11 & 12 year olds that aren't quite ready for Up and Comers. Will use a combination of green dot balls when needed for match play.

**Foam/Red Ball, Red Ball, Orange Ball** (ages 4-10) Clinic opportunities will be at Indianapolis Racquet Club Dean Rd. More information can be found on IRC website or can get flyer at the club.

**ProPerformance Academy 2018 Camp Registration Page**

**Sule** Email: sladipo@yahoo.com Phone: 317-750-5039  
**Kevin:** Email: kgillk2tennis@gmail.com Phone: 317-403-8743  
**Hector:** Email: hctennis@hotmail.com Phone: 317-408-1433  
**Karl:** Email: karlkrauter@live.com Phone: 317-445-9694

**Payment:** Checks payable to ProPerformance. Mail checks, along with bottom portion of form to:  
3950 E 75th St., Indpls, IN, 46240

(keep for your record) AMOUNT PAID - Full \$ \_\_\_\_\_ or 1/2 deposit: \$ \_\_\_\_\_ Paid for T-Shirt \$ \_\_\_\_\_

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Cut and Include with check to ProPerformance:

**\*\*PLAYERS NEW TO THE PROGRAM MUST BE EVALUATED OR BE VALIDATED, PLEASE CONTACT ONE OF THE PROS.**

**I will participate in the following camp (check box and check amount, also what weeks will participate):**

- Tourney/Varsity**
- Up and Comers**
- Young Champs**

4 days Full Summer: Full Payment \$970 \_\_\_\_\_ 1/2 Payment \$485 \_\_\_\_\_

2 days Full Summer: Full Payment \$540 \_\_\_\_\_ 1/2 Payment \$270 \_\_\_\_\_

Weekly: Factor in # of wks \_\_\_\_ @\$150 per week = Total \$ \_\_\_\_\_

Daily Rate: \$50

(Summer not prorated, must pay for summer or full amount of weeks participating. Pay full amt. or 1/2 deposit, please mail in 2<sup>nd</sup> 1/2 of Payment by July 6th.) **(Indoor costs are already factored into totals with no extra cost.** Parents will have to drive your kids to indoor club if clinic is rained out, please text, email Kevin or sign transportation line below to give permission for pros/other parents to help accommodate transportation to Dean or IRC East if courts available.) **\*\*No clinics during week 6 on July 4th week\*\***

TOTAL AMOUNT DUE: \$ \_\_\_\_\_

AMOUNT PAID: Full: \$ \_\_\_\_\_ or 1/2 deposit: \$ \_\_\_\_\_

T-Shirt \$15, please check off size and write separate check.

XS\_\_\_ S\_\_\_, M\_\_\_, L\_\_\_, XL\_\_\_ Separate Check \$ \_\_\_\_\_

Transportation permission if needed: (Please sign) \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ School \_\_\_\_\_ 18-2019 Grade: \_\_\_\_\_

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_ Parent Names: \_\_\_\_\_

I do hereby waive, release, and discharge Lawrence North High School and ProPerformance respective staffs and employees from any and all rights and claims for damages resulting from injuries to my person or property which may be sustained by me or my child in connection with my association with or participation or arising out of my travelling to and from Lawrence North High School, as well as travelling with ProPerformance staff for ladder matches and to IRC Dean indoors when given permission. We, the parents or guardians, agree to the above participation in program including emergency and referral services if necessary. I have read and hereby accept these conditions.

Signature of Parent/Guardian: \_\_\_\_\_