

le Gassick Squash Camp at Brown 17th year!

Directed by: Stuart le Gassick
 Call : 401- 351- 1834
 E-mail: legassicksquash@gmail.com

****28 Campers Max ****

Junior Squash Camp 2006 @Brown University June 12-16, 19-23, 2006

The Staff includes:

Stuart le Gassick

- Director of Varsity Squash at Brown University since 1989
- Honors Degree in Human Movement, Sport & Recreation Management Studies, Leeds University
- British Squash Coaching Certification
- USA Level 2 Technical Coach
- Coach of numerous All Ivy and All American Collegiate players
- Coach of numerous U.S. National Junior Champions and Junior Squash Camps in U.S. and U.K.

Bill McNally

- Certified, Level 3, Squash Canada
- Head Coach of Men and Women at Connecticut College.
- Coaching Representative on the Executive Board of the USSRA
- Author of Squash Books and articles.

Pam Saunders

- Head Coach Mt. Holyoke College,
- Zimbabwe International
- **And other top International**

Coaches/College Varsity Players!

"My son so enjoyed his week at the Brown Squash Camp. Thanks so much! Whatever you do, the kids seem to love it. Indeed, both my sons have really enjoyed their weeks at the Camp".

We will study:

- | | |
|--------------|---------------------|
| 1. Technique | 4. Rules/Refereeing |
| 2. Footwork | 5. Sportsmanship |
| 3. Tactics | 6. Fun, Fun, Fun |

Facilities: We have at our disposal the outstanding athletic facilities of the Brown University Campus, located on the beautiful East Side of Providence, including **11 International Squash Courts** and an Olympic Swimming pool.

Camp Fees: \$475.00 per week:

Full payment by June 1st ensures enrollment.

Cancelation Policy - Before June 1st \$75.00

Administration Fee. After June 1st there is a non refundable \$125.00 Administration Fee.

Please Circle week/s : **June 12-16, 19-23**

Camp Hours: 9:00am- 2:45pm

Ages: 10 - 18 years old

Often less than 3 campers per Coach/Court

Sponsored by *Wilson*

Make checks payable to:

Stuart leGassick ,
 136 Eighth Street,
 Providence, RI 02906

le Gassick Squash Camp 2006 Application

Name:	Date of Birth:	Contact Person:
Address:	City:	State Zip
Home Phone:	Work Phone:	Emergency Phone:

It is understood that the le Gassick Squash Camp at Brown does not provide medical insurance covering injuries of any nature during the periods of the camp **June 12-16, 19-23, 2006.**

The undersigned hereby releases le Gassick Squash Camp, its successors, officers, agents, and employees from any and all claims, demands and causes of actions resulting from participation in le Gassick Squash Camp. I hereby authorize the directors of le Gassick Squash Camp to act with their best judgment in case of an emergency requiring medical attention.

Signature of Guardian: _____ Date: _____

Insurance Company: _____ Policy Number: _____