

Safe Harbor Annapolis Robert Nuscher, Tennis Director 519 Chester Avenue Annapolis, MD 21403 Phone: (410) 268-8282 (O)

Email: annapolis@shmarinas.com

## 2025 Junior Tennis Camp

**Summertime play!** Summer camp includes 120 minutes of tennis instruction, games, and one hour of swimming. For the younger kids, it may also include pickleball. Campers should bring or wear tennis shoes, swimsuits, towel, hats, rackets, water, sunscreen, snack and PFD if non-swimmer.

Age 5 - 11 Age 12 & up

Monday - Thursday (Rain Make-up Friday)

9:00 am - 12:00 pm

Members: \$275, Non-Members: \$325

Week 1: June 16 – June 19 Week 7: July 28 – July 31

Week 2: June 23 – June 26 Week 8: August 4 – August 7

Week 3: June 30 – July 3 Week 9: August 11 – August 14

Week 4: July 7 – July 10 Week 10: August 18 – August 21

Week 5: July 14 – July 17

Week 6: July 21 - July 24

## **Biography**

Robert Nuscher, USPTR

crushertennis@gmail.com

443-996-4032

Robert grew up in Bucks County, Pennsylvania playing his junior tennis in the Middle States Section. After moving to Maryland, he played tennis at Annapolis High School and went on to graduate from the University of Maryland in 1993. Upon graduation, he played for 2 years on the ITF Satellite Circuit competing professionally in tournaments across the country. After playing competitively, Robert taught at the world renowned Saddlebrook Resort and Academy in Tampa, Florida working with several top 100 players. Robert was the Director of tennis for 7 years at the prestigious Elkridge Club in Baltimore, Maryland followed by 10 years at the Tennis Club of St. Croix in the U.S Virgin Islands. Upon returning to the states, he opened a men's clothing and furniture store, Winston's Haberdashery, in Annapolis that serviced the Community for 10 years. Currently, Robert is the Head Teaching Professional at Sportfit Bowie where he founded Crusher Tennis Academy and teaches over 150 players weekly. Robert and his staff are proud to bring their love of the game and joy of teaching to all ages and levels at Safe Harbor Annapolis in 2024!

Private Lessons: Director Members: \$120, Non-Members: \$140
Private Lessons: Staff Members: \$100, Non-Members \$120
Private Lessons: Junior Staff Members: \$80, Non-Members \$100

• If interested in semi-private lessons or forming your own group, please contact Robert 443-996-4032

Cash, checks, and Venmo are accepted. Please contact Robert directly for registration and payment.



Date: \_\_\_\_\_

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		Camp Registration		
Parent or Guardian In	formation	Parent or Guardian Information		
NAME		NAME		
STREET ADDRESS		STREET ADDRESS (If not the same as other Parent)		
CITY, STATE, ZIP		CITY, STATE, ZIP		
CELL PHONE NUMBER		CELL PHONE NUMBER		
EMAIL ADDRESS		EMAIL ADDRESS		
	Junior Ten	nis Camper		
NAME D.O.E	B. AGE	□ Swimmer □ non-Swimmer		
Complete sign up along with your paym	ent due at the submiss	ion of this Registration. No refunds.		
□6/16 - 6/19, 9:00a - 12:00p □7/7 -	- 7/10, 9:00a - 12:00p	□7/28 − 7/31, 9:00a − 12:00p		
□6/23 – 6/26, 9:00a – 12:00p □7/14	o □8/4 – 8/7, 9:00a – 12:00p			
□6/30 – 7/3, 9:00a – 12:00p □7/21	ı – 7/24, 9:00a – 12:00 <sub> </sub>	p □8/11 – 8/14, 9:00a – 12:00p		
·		□8/18 – 8/21, 9:00a – 12:00p		
and subsidiaries shall not be liable or the Camper family members, gu from the Member use of SHM's f negligence, fire, theft, Act of God, and save harmless SHM, Safe I subsidiaries from or against any oby the Camper of SHM's facilitie property damage arising out of the	M, Safe Harbor Marinas for any loss, damage, or lests, invitees, agents a facilities, whether such, or any other cause or Harbor Marinas, LLC, claims, damages and es and hereby agrees to use at SHM's area or Marina have duly exect	uted this Agreement as of the day and year written		
his Agreement is not binding until signed	by Parent or Guardian	or Camper.		
SHM"	"Paren	t or Guardian"		
HM Annapolis, LLC,				
Delaware limited liability company Print:		First Name, Last Name		
y:	Sign H	lere:		
(Authorized Signatory)		(Member)		

Date: \_\_\_\_\_



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## **Junior Tennis Camp Payment Authorization**

SHM requires payment at the time of registration. Please indicate your payment preference below.

I authorize SHM to	charge the total due	e Credit Card#			_
Exp Date	CVC	<u> </u>			
I AUTHORIZE Safe Harbor Marin charge the Payment Method in a authorized user of the Payment corresponds to the terms indica This Authorization remains in fu as to afford SHM a reasonable o copies shall be treated as origina	accordance with the terms Method and that I will not ted in this Authorization a Il force and effect until SHI pportunity to act on it. Thi	s outlined in this Authoriza of dispute the payment with and the applicable Agreeme IM receives written notifica	ation or other Agreemen h my Payment Method ent. ation from me of termin	nt with SHM. I certify tha company, so long as the nation in such time and in	at I am an transaction n such a manner
Print Name					
Authorized Signature		 Date			