



Camp Weeks: July 7-10 & July 14-17

@ Clear Falls HS

3rd-5th Grade (7:30-8:30am), 6th-8th Grade (8:30-10:00am), 9th-10th Grade (10:00-11:30am), 11th-12th (11:30-1:00pm)
(Grade based on 2025-26 school year)

Tennis Workout Groups: Tuesdays in June & July

Boys & Girls Tuesdays - @Clear Falls HS

3rd-5th Grade (7:30-8:30am), 6th-8th Grade (8:30-10:00am), 9th-10th Grade (10:00-11:30am), 11th-12th (11:30-1:00pm)
(Grade based on 2025-26 school year)

New This Year! - TOURNAMENTS:

@ Clear Falls HS. (Taking Summer Blast fun to the NEXT LEVEL!)

Register separately at the links below

- Dingles Open!: July 12th (Grades 9th and up) Register at: <https://forms.gle/VGmTomvnWM9RjhHR7>
- Triples Open!: July 19th (Grades 9th and up) Register at: <https://forms.gle/qrewAbdpkKwBTYHe6>

Camp Director: Pat Marrie (Head Coach at CFHS)/Email: pmarrie@ccisd.net

"This camp/activity is independently organized and operated is not sponsored by or officially affiliated with Clear Creek ISD."

Camp Application 2025

Camper's Name: _____ Name of School: _____ Grade (2025-26): _____

Age: ____ Sex: ____ Male ____ Female Address: _____ City: _____ Zip: _____

Parent/Guardian's Name: _____ Phone: (____) ____ - _____ Cell: (____) ____ - _____

*** Email: _____ (Please provide!) ***Referred By: _____



Tennis Camp & Drill Groups Registration/Payment:

Register online at <https://forms.gle/deBpRtX8Udp8kxr19>



Pay by Venmo @summerblasttennis (business acct.)

OR

Mailed to: Pat Marrie 2301 Cantabria Ln., League City TX 77573 (Makes checks payable to: Patrick Marrie)

Cost: \$100.00 for Workout Groups/ \$100 for each week of Camp.

(Take an additional \$10 off each additional camp! Ex: Workouts + 1 Camp = \$190, Workouts + both Camps = \$280)

Medical Release:

Campers rightfully assume that those who are responsible for the conduct of the tennis camp have taken precautions to minimize risk of injury. Nonetheless, participation in sports involves inherent risk of injury and by enrollment, accept and assume such risk.

Parent / Guardian

I hereby give my consent for the camper to participate in the tennis and related camp activities. If at any time it is necessary for the camper to receive outside or professional medical attention, I hereby give my consent to the camp personnel to secure the services of the physical or medical facility selected and to secure transportation as is deemed necessary. I will not hold the camp or its personnel responsible for any benefits and will secure adequate family insurance coverage if protection is desired.

Camper's Name: _____

Parent/Guardian Signature: _____ Date _____, 2025