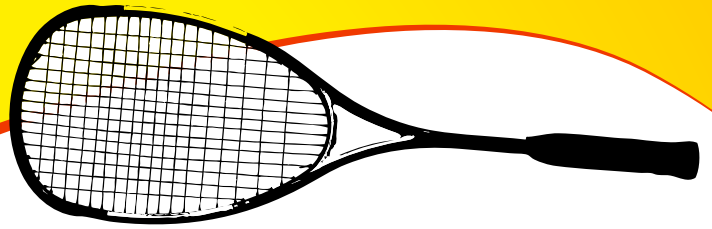


# SQUASH CLINICS

with Doug Baumgarten,  
Squash Pro



**JOIN THE GREATEST GAME IN THE WORLD, OR GET TO THE "NEXT LEVEL." IMPROVE YOUR TECHNIQUES, GAME STRATEGY, OR JUST PREPARE TO JOIN THE SQUASH LEAGUE.**

**Saturdays: 10/4, 10/11, 10/25, 11/15, 11/22**

- 10-11am**    **Beginners - Good Beginners**
- Basic grip and stroke production
  - Proper warmup and how to practice
  - Basic game strategy and tactics

- 11am-12noon**    **Intermediate**
- Analyze your strokes – and make them better!
  - How to be deceptive – and powerful!
  - Match strategy, analysis, and how to win consistently

**Cost:** \$150 per member for all 5 sessions (members only).  
Participation numbers – a minimum of 3 players, a maximum of 6 players.

- You must reserve the package to guarantee your place – reserve now!
- No refunds for missed sessions – this is a special package rate!
- If space allows, you may attend individual sessions at \$40 per session.

**Location:** Worldgate Sport&Health:  
13037 Worldgate Drive, Herndon, VA 20170

For more information or to register please contact Doug  
at 301-448-5499 or email [dbaumgarten@sportandhealth.com](mailto:dbaumgarten@sportandhealth.com)

**TESTIMONIAL:**

*"I just completed Doug's Saturday morning clinic. I'm thrilled I participated in the clinic. Doug knows the game but perhaps the best part is that he can explain the proper techniques to a guy like me who has years of bad habits. My game has noticeably improved. I'm beating a few guys who I was never able to." – M.G.*



**Doug Baumgarten**

**Fall Squash Clinics with Doug Baumgarten Registration Form**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # (h) \_\_\_\_\_ (w) \_\_\_\_\_  
 (c) \_\_\_\_\_ Member# \_\_\_\_\_  
 E-mail address \_\_\_\_\_

**Please check which clinic you are registering for:**

- 10-11am Beginners - Good Beginners  
 11am-12noon Intermediate

Type of Payment:     Cash     Check     MasterCard  
                                    Visa         AMEX     Discover

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

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

RELEASE: In consideration of making facilities and/or services available, I do hereby for and on behalf of myself and my heirs and legal representatives, release and forever discharge Sport &Health, its owners, manager and representatives from any and all claims and demands of every kind, nature and character which I may have or hereafter acquire for any and all damages or losses which may be suffered or sustained by me in connection with my activity and all such claims are hereby waived and released.

**sport&health**

WORLDGATE  
[sportandhealth.com](http://sportandhealth.com)

**Payment must accompany registration form.**

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