

SCHEDULING INFORMATION Please select the time preference for your program:

Lesson Programs: Winter/Spring Session: Mon., 1/23/12 thru Fri., 6/15/12 (off dates: 1/16, 2/18-24, 4/6-15, 5/28)

PLEASE NOTE: THE WINTER/SPRING SESSION BEGINS BEFORE ALL THE DAYS OF THE WEEK HAVE COMPLETED SESSION 1.

SCHEDULES ARE SUBJECT TO CHANGE. PLEASE ASK FOR A CALENDAR FOR ENDING DAYS AND DAYS OFF FOR EACH SESSION.

For ADULT T.K., PRIVATE AND SEMI-PRIVATE LESSONS: Please indicate at least three available days by preference (1,2,3...)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Day Preference	_____	_____	_____	_____	_____	_____	_____
Earliest Start Time	_____	_____	_____	_____	_____	_____	_____
Pro Preference	_____	_____	_____	_____	_____	_____	_____

For the programs below, please check the box(es) of those you're signing up for.

THE SPORTIME ZONE <input type="checkbox"/> Tuesday 8:00pm-9:30pm <input type="checkbox"/> Sat. 10:00AM-Noon (NEW - 2 Hours) <input type="checkbox"/> Wednesday 12:30-2:00pm	USTA DRILLS <input type="checkbox"/> Tuesday Noon - 1:30pm
INSTRUCTIONAL DOUBLES <input type="checkbox"/> Women's 3.0 Friday, 12:30-2pm <input type="checkbox"/> Women's 2.5 Thursday, 9:30-11am	<input type="checkbox"/> Women's 4.0 Tuesday, 12-1:30pm <input type="checkbox"/> Women's 3.5 Monday, 12-1:30pm <input type="checkbox"/> Men's 3.0, Tuesday, 9pm - 11pm
MAJOR LEAGUE TENNIS - DAYTIME <input type="checkbox"/> 3.0 Singles, Friday, 10:00 - 11:00 <input type="checkbox"/> 3.0 Singles, Monday, 1:00 - 2:00 <input type="checkbox"/> 3.0 Singles, Monday, 9:30 - 10:30 <input type="checkbox"/> 3.3 Singles, Monday, 1:00 - 2:30 <input type="checkbox"/> 3.3 - 3.5 Singles, Wednesday, 9:30 - 11:00 <input type="checkbox"/> 3.5+ Singles, Tuesday, 11:00 - 12:00 <input type="checkbox"/> 3.5 - 4.0 Singles, Tuesday, 9:30 - 11:00 <input type="checkbox"/> 3.0 Doubles, Fixed Partner, Thur., 12:30 - 2:00 <input type="checkbox"/> 3.5 Doubles Fixed Partners, Thurs., 1:00 - 2:30 <input type="checkbox"/> 3.5+ Doubles Fixed Partners, Thurs., 11:00 - 12:30 <input type="checkbox"/> 3.5+ Doubles Fixed Partners, Thurs., 11:30 - 1:00 <input type="checkbox"/> 4.0 Doubles, Fixed Partner, Friday, 11:00 - 1:00	MAJOR LEAGUE TENNIS - EVENING <input type="checkbox"/> 2.5 - 3.0 Women's Singles, Monday, 8:00 - 9:00 <input type="checkbox"/> 3.5 Women's Singles, Thursday, 7:00 - 8:30 <input type="checkbox"/> 3.0 Men's Singles, Monday, 9:00 - 10:30 <input type="checkbox"/> 3.5 Men's Singles, Tuesday, 9:00 - 11:00 <input type="checkbox"/> 3.5 Men's Singles, Wednesday, 9:00 - 11:00 <input type="checkbox"/> 3.5-4.0 Men's Singles, Wednesday, 9:00 - 11:00 <input type="checkbox"/> 3.5-4.5 Team Tennis, Sunday, Call for Info <input type="checkbox"/> 6.0-8.0 comb. level USTA Mixed Dbls (call for info) <input type="checkbox"/> Social Mixed Doubles (call for info)

LEAGUE SCHEDULE: Winter/Spring Session: Tue. 1/10/12 thru Fri., 5/25/12 (off dates: 2/18-24, 4/7-15)
PLEASE NOTE: THIS SESSION BEGINS BEFORE ALL THE DAYS OF THE WEEK HAVE COMPLETED SESSION 1.
 PLEASE ASK FOR A CALENDAR FOR ENDING DAYS AND DAYS OFF FOR EACH SESSION.
 Your signature is required below.

Payment Terms, Liability Waiver and Assumption of Risk and Release			
<p>I understand that membership is required for participation in SPORTIME (the "Club") programs and that this application must be accompanied by the required, non-refundable, deposit to confirm registration. I further understand that for all winter/spring program sessions (whether equal to, less than or more than 17 weeks in duration), I must remit the required deposit upon enrollment and pay in full no later than the first day of play. If my account is not paid as required, I consent that SPORTIME may charge my checking/credit card account for the full amount past due plus a late fee on the first of the following month. I accept that enrollment in SPORTIME programs is for the full session and that no refunds will be given for withdrawals or absences after the session begins. Under no circumstances will the deposit be refunded, however, depending upon the timing and circumstance of a withdrawal, a credit for future services, in the amount of the deposit, may be issued. By signing below I agree that I will abide by all rules and regulations which now exist or which may be hereafter adopted or amended by the management of the Club. I further acknowledge and agree that there are certain inherent dangers in playing tennis and that the Club shall not be liable for any personal injuries, property damage, or other loss sustained by me in, on or about the premises of the Club, or arising out of the use or intended use of any facilities, equipment or other property of the Club, whether or not said personal injuries, property damage, or other loss sustained by me is the result of the negligence of the owners, agents or employees of the Club or the negligence of any other persons present on the premises of the Club. These conditions apply individually and/or jointly with other players, or guests of players. If I enroll in Club programs and am asked to furnish the Club with appropriate medical exams, I agree to furnish such exams and records. In addition, in case of accident or injury to me and if an emergency contact person cannot be reached, I grant the Club permission to obtain medical attention for me if necessary, for which I will be financially responsible. THE CLUB RESERVES THE RIGHT TO CLOSE COURTS FOR REPAIRS OR ALTERATIONS. The Club reserves the right to cancel this contract at any time, at its sole discretion, and management's sole liability shall be to refund any amounts previously paid on a pro-rata basis. SPORTIME retains the rights to any photographs or video taken at the facility to be used for publicity or advertising. SPORTIME WILL MAKE EVERY EFFORT TO SCHEDULE LIMITED MAKE UPS FOR CLASSES MISSED BY THE PARTICIPANT, BUT DOES NOT GUARANTEE SUCH MAKE UPS.</p>			
MEMBER'S SIGNATURE _____	DATE _____	STAFF SIGNATURE _____	DATE _____

In order for this application to be processed, please complete all required information, sign this application and send it, along with the required deposit for each program, to: **SPORTIME Kings Park 275 Old Indian Head Road, Kings Park NY 11754.** Or, you may fax it to **631.544.9355.** Visit our website at www.SportimeNY.com to find out about the exciting benefits you are entitled to as a SPORTIME Member.

OFFICE USE ONLY, PLEASE: Mem# _____ Pmt. Amt _____ \$ cc Date _____ Rec# _____ Rec. Initial _____