SPORTIME SYOSSET OFF-COURT FITNESS

SPORTIME SYOSSET 75 HASKETT DRIVE, SYOSSET NY 11791
P. 516/364-2727 | F. 516/364-3928 | www.SportimeNY.com/syosset-tennis





OFF-COURT TRAINING

SPORTIME Syosset now offers our members the opportunity to workout with a professional fitness instructor on site!

Our new fitness director, Denise Schmidt, will offer Yoga and Pilates as complimentary member benefits; a tennis-specific training program for competitors of all ages who want to take their games to the next level; and customized one-on-one personal training.

Yoga and Pilates group classe are offered during junior programming, so come exercise while your child plays tennis! If you are not yet a member, these classes alone will more than cover the cost of your dues.

The Tennis Training group class is structured to help players add quickness, responsiveness, and power to their games. Fitness is the key advantage that champion players have today. Don't shortchange your game! Denise uses a system that will take players through intense training stages, resulting in increased strength and agility, which also enhances the overall athletic confidence that will surely improve results.

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DENISE V. SCHMIDT, FITNESS DIRECTOR

ACE CERTIFIED PERSONAL FITNESS TRAINER SINCE 1986
AAFP MEDICAL EXERCISE SPECIALIST SINCE 1996
IDEA ELITE PFT SINCE 1998

Denise has been in the fitness industry since 1985. She started as an aerobics instructor, earned her certification as a personal trainer, then branched out to become a

medical exercise specialist. Denise has studied many factors for improving the wellness of clients to help them on their way to a healthier lifestyle. She has studied Nutritional Guidance, Fitness for Kids, Sport- Specific Training, Yoga, Pilates, Aquatics Training and more.



For more information, call 516/364-2727 (Caitlyn Ortiz)

www.SportimeNY.com/Syosset-Tennis SPORTIMESM... Fitness for Real Life PAID-FOR TRAINING: 9-WEEK SESSION: \$180; 1-hour class: \$25

MONDAY 11:30am-12:30pm WEDNESDAY 9:30am - 10:30am

MEMBER BENEFIT CLASSES (NO CHARGE - Register at the front desk)

TUESDAY 6:00pm - 7:00pm Yoga/Pilates THURSDAY 5:00pm - 6:00pm Yoga/Pilates

APPLICATION FORM

PLEASE COMPLETE THE FOLLOWING INFORMATION AND RETURN THIS FORM TO THE FRONT DESK.

PERSONAL INFORMATION (Please print clearly.) □ M □ F						
First Name	Last Name					
Billing Address						
City	State	Zip				
Home Phone #	Cell Pho	one #				
Email Address (required)						
Any medical conditions or other special needs?						
Are you a SPORTIME Member?						
PLEASE INDICATE YOUR CHOICE:						
□9 -WEEK SESSION (\$180)						
□1-DAY (\$25) PLEASE INDICATE THE DATE:						

PAYMENT INFORMATION/TERMS-CONDITIONS/DISCLAIMER

	Payment	by	Check Enclosed		Payment	by	Credit	Card
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Credit Card #

Exp. Date

I understand that membership is required for participation in SPORTIME (the "Club") programs and that this application must be accompanied by payment in full to confirm registration. 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. 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 physical activity 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 the undersigned 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 participants, participant's children or guests of participants. 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 FACILITIES 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 of video taken at the facility to be used for publicity or advertising. SPORTIME DOES NOT GUARANTEE MAKE UPS FOR CLASSES MISSED BY THE PARTICIPANT.

Signature Date