

□ NEW MEMBER □ EXISTING MEMBER □ EXISTING MEMBER W/CHANGES

PROGRAMS: D Fall 17-Week Session: Wed, Sept 11, 2024 - Sat, Feb 1, 2025 LEAGUES: D Fall 16-Week Session: Wed, Sept 11, 2024 - Fri, Jan 24, 2025

□ Full 34-Week Session: Wed, Sept 11, 2024 - Sun, June 22, 2025 □ Full 32-Week Session: Wed, Sept 11, 2024 - Mon, Jun 2, 2025

PLAYER INFORMATION Please con	nplete all fields and print clearly. Playe	ers must be active S	SPORTIME Members to partic	ipate in SPORTIME programs.
PLAYER: FIRST NAME	LAST NAME		DATE OF BIRTH	GENDER
				FEMALE  MALE  NON-BINARY
EMAIL ADDRESS (REQUIRED)		NTRP RATING	DO YOU PLAY USTA?	PLAYER UNIVERSAL TENNIS RATING
			🗆 YES 🖾 NO	
STREET ADDRESS	ADDRESS 2		CITY	STATE ZIP
MOBILE PHONE	HOME PHONE	BUSINESS PHONE		HOW DO YOU PREFER TO BE CONTACTED:
EMERGENCY CONTACT: FIRST NAME	LAST NAME		RELATION TO PLAYER	CONTACT NUMBER
How did you hear about us? 🗆 Word	of Mouth 🛛 Mail 🗆 Web 🗆 Social M	edia	□ Ad □ Refe	rral, who can we thank?

Program Costs						
ITEM DESCRIPTION	DURATION	PER DIEM	17 WEEKS	34 WEEKS	# SESSIONS	TOTAL
Adult Group Lessons (based on 4 players)	1 Hour	\$55.00	\$750.00	\$1,275.00		
Adult Group Lessons (based on 4 players)	1.5 Hour	\$65.00	\$950.00	\$1,750.00		
□ RTN Singles Strategy	1.5 Hour	N/A	\$895.00	\$1,625.00		
□ RTN Doubles Strategy	1.5 Hour	N/A	\$850.00	\$1,550.00		
ITEM DESCRIPTION	DURATION	PER DIEM	16 WEEKS	32 WEEKS	# SESSIONS	TOTAL
□ Leagues - Women's Singles (up to 2 byes)	1.5 Hour	N/A	\$595.00	\$895.00		
Leagues - Women's Doubles (up to 2 byes)	1.5 Hour	N/A	\$575.00	\$850.00		
Leagues - Women's Doubles (up to 2 byes)	2 Hour	N/A	\$650.00	\$975.00		
ITEM DESCRIPTION	DURATION	PER DIEM	8 WEEKS	17 WEEKS	# SESSIONS	TOTAL
Play Tennis 101 (for beginners)	1 Hour	N/A	\$250.00	N/A		
ITEM DESCRIPTION	DURATION		MEMBERS	NON-MEMBERS	# SESSIONS	TOTAL
□ The SPORTIME Zone - PER DIEM	1.5 Hour		\$35.00	\$50.00		
TOTAL						
DEPOSIT: Required 40% deposit.						
BALANCE DUE						

Schedule Selection Please check boxes that apply. For a list of 'No Play' dates, please visit us online.

LEAGUES - 1.5 HOUR		
□ Women's Singles	4.0-4.5	Fri: 9:30am - 11:00am
□ Women's Doubles - 1.5 Hour	RR 3.0	Wed: 9:30am - 11:00am
U Women's Doubles - 1.5 Hour	RR 3.0+	Thur: 9:30am - 11:00am
U Women's Doubles - 2 Hour	RR 3.0-3.5	Tue: 10:00am - 12:00pm

**RTN DOUBLES STRATEGY - 1.5 HOUR** 

□ Mon: 9:30am - 11:00am

ADULT TK	
Preferred Day/Time (1)	Preferred Coach
Preferred Day/Time (2)	Preferred Coach

THE SPORTIME ZONE - 1.5 HOUR	
□ Mon: 9:00pm - 10:30pm	3.5+
□ Tue: 12:30pm - 2:00pm	2.5-3.0
□ Wed: 9:00pm - 10:30pm	3.0+
□ Fri: 11:00am - 12:30pm	3.5+
□ Sun: 10:00am - 11:30am	2.5-3.0

**RTN SINGLES STRATEGY - 1.5 HOUR** 

□ Mon: 9:30am - 11:00am

2024-2025 Program Application

Payment Information Please select your payment method:

CREDIT CARD				
□ I authorize SPORTIME to bill my credit card on file.		□ Please use this card: □	I MC □ VISA □ AMEX □	] DISCOVER
CARD NUMBER	EXPIRATION	□ Select to make this your	guaranteed form of payment	on file.
CHECK OR CASH				
You must have a credit card on file if you are not paying the ful	l amount.	□ CHECK □ CASH	IF CHECK, NO.	AMOUNT

## Payment Plan Please choose one of the options below:

OPTION A: SPORTIME'S EASY PAYMENT PLAN The SPORTIME Easy Payment Plan (EPP) requires a 40% non-refundable deposit to reserve a space in any SPORTIME program, with the remaining balance charged to a member's valid credit card, for programs commencing in September or thereafter, as follows:

- For 8-13 week programs, remaining balance to be drafted on the first of the month following the month during which the program commences;
- For 15-18 week programs, remaining balance to be drafted in three (3) equal installments, on October 1, November 1 and December 1; or

• For 34 -36 programs, remaining balance to be drafted in six (6) equal installments on October 1, November 1, December 1, January 1, February 1 and March 1. For enrollment in any SPORTIME program after August 31st, the amount of any installment payment due, per the schedule above, will be due and payable in addition to the deposit. EPP participants MUST enroll in Full Auto Pay, thereby authorizing SPORTIME to draft all club charges due on a monthly basis, including membership dues, pro shop charges and per diem court time, from such credit card or bank account. If I did not choose Full Auto Pay as my payment profile on my SPORTIME Membership Agreement, by choosing the EPP, I am hereby authorizing SPORTIME to change such profile to Full Auto Pay, effective immediately. Once enrolled in Full Auto Pay, any additional programs or services that members choose to charge to their SPORTIME accounts will be billed and drafted using the EPP schedule..

## OPTION B: PAYMENT IN FULL BY FIRST DAY OF PLAY | understand that if I do not choose the EPP described above, I must remit a 40% non-refundable deposit along with this application to confirm registration, and that the remaining balance must be paid in full by the first day of play.

## Liability Waiver, Assumption of Risk and Release and Other Terms:

By signing below I agree that I am the named participant and that I will abide by all rules and regulations which now exist or which may be hereafter adopted or amended by SPORTIME. I further agree to adhere to the terms of the payment plan I have chosen above, and that if my account is not paid as required SPORTIME may charge my bank account/credit card on file for the full amount past due plus a late fee. I acknowledge and agree that there are certain inherent dangers in playing tennis and in participating in other SPORTIME programs, services and activities, and that SPORTIME shall not be liable for any personal injuries, property damage, or other loss sustained by me in, on or about the premises of SPORTIME, or arising out of the use or intended use of any facilities, equipment or other property of SPORTIME. I hereby further declare myself to be physically sound and suffering from no conditions, impairment, disease, infirmity or other illness that would prevent my participation in SPORTIME programs, services and activities. In the case of an accident or injury to me, and if an emergency contact person cannot be reached, I grant SPORTIME permission to obtain medical attention, if necessary, for which I will be financially responsible. 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. I also understand that membership is required for participation in certain SPORTIME programs. SPORTIME programs. SPORTIME facilities or at off-site SPORTIME programs or events, to be used for SPORTIME retains the rights to any photographs or video taken of me at SPORTIME facilities or at off-site SPORTIME programs or events, to be used for SPORTIME publicity, marketing, social media and advertising. SPORTIME's Privacy Policy can be viewed at: https://www.sportimeny.com/privacy\_policy.php. SPORTIME DOES NOT GUARANTEE MAKE-UPS FOR CLASSES MISSED, and any make-up authorized must be completed by August 31st of the session year.

AUTHORIZED SIGNATURE:
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DATE:

## **Register Today!**

Complete both sides of this application and return with required deposit by mail, fax, or email, or register conveniently online:

SPORTIME Bethpage Tennis Mail: 101 Norcross Avenue, Bethpage, NY 11714 | Fax: 516-937-7330 Register Online: www.SportimeNY.com/BethpageTennis. If you have questions, please contact Club Manager & Adult Director, Maria Kinalis Phone: 516-933-8500 | Email: mkinalis@sportimeny.com

Bethpage Tennis Women's League Director, Alison Corcoran Phone: 516-933-8500 | Email: acorcoran@sportimeny.com