

□ SPORTIME Syosset 75 Hasket Dr, Syosset, NY 11791 TEL: (516) 364-2727 www.SportimeNY.com/STM

Spring 2024 Program Application

D Spring 17-Week Session: Tues, Jan 23, 2024 - Mon, Jun 17, 2024

PLAYER INFORMATION Please compl	ete all fields and print clearly. Players must be	active SPORTIME Members to pa	articipate in SPORTIME prog	rams.	
PLAYER: FIRST NAME	LAST NAME		DATE OF BIRTH	GENDER	
PLAYER EMAIL ADDRESS (IF PLAYER IS OVER 13)	PLAYER MOBILE NUMBER (IF O	VER 13)	SCHOOL & GRADE ENROLLED SEP	T	
STREET ADDRESS	ADDRESS 2	CITY	STATE	ZIP	
PARENT/GUARDIAN: FIRST NAME	LAST NAME	EM	EMAIL ADDRESS (REQUIRED)		
MOBILE PHONE	HOME PHONE BUSINESS	BUSINESS PHONE HOW DO YOU PREFER TO BE CONTACTED:			
			PHONE EMAIL		MAIL
EMERGENCY CONTACT: FIRST NAME	LAST NAME	RELATION TO PLAYER	R CONTACT N	JMBER	
How did you hear about us? Word of	Mouth 🛛 Mail 🗆 Web 🗖 Social Media	🗆 Ad 🗆 R	Referral, who can we thank?		

Program Costs	DURATION	17 WEEKS	# SESSIONS	TOTAL
Private Lessons - Staff	.5 Hour	\$1,360.00		
Private Lessons - Senior	.5 Hour	\$1,496.00		
Private Lessons - Master	.5 Hour	\$1,632.00		
Private Lessons - Staff	1 Hour	\$2,465.00		
Private Lessons - Senior	1 Hour	\$2,720.00		
Private Lessons - Master	1 Hour	\$2,975.00		
Private Lessons - Master Plus	1 Hour	\$3,230.00		
Private Lessons - AAD	1 Hour	\$3,740.00		
Private Lessons - Staff	1.5 Hour	\$3,650.00		
Private Lessons - Senior	1.5 Hour	\$3,975.00		
Private Lessons - Master	1.5 Hour	\$4,395.00		
Private Lessons - Master Plus	1.5 Hour	\$4,795.00		
Private Lessons - AAD	1.5 Hour	\$5,575.00		
Off Peak Private Lessons - Staff (M-F 7am-9am or 12pm-2pm)	1 Hour	\$2,040.00		
□ Off Peak Private Lessons - Senior (M-F 7am-9am or 12pm-2pm)	1 Hour	\$2,210.00		
Semi-Private Lessons - Staff	1 Hour	\$1,445.00		
Semi-Private Lessons - Senior	1 Hour	\$1,615.00		
Semi-Private Lessons - Master	1 Hour	\$1,785.00		
Private Groups (Must have 4 players) - Tier One	1 Hour	\$1,175.00		
Private Groups (Must have 4 players) - Tier Two	1 Hour	\$1,275.00		
Private Groups (Must have 4 players) - Tier One	1.5 Hour	\$1,750.00		
Private Groups (Must have 4 players) - Tier Two	1.5 Hour	\$1,875.00		
□ Fitness Sessions at Syosset	1 Hour	\$1,785.00		
TOTAL	1	•		
DEPOSIT: Required 40% deposit.				
BALANCE DUE				



Schedule Selection Private and semi-private lessons might not be available on weekdays from 4:00pm - 8:00pm. 48 hour cancellation policy applies. Annex Director rate available upon request.

PRIVATE LESSON PREFERENCES		SEMI-PRIVATE LESSON PREFERENCES: Partner must be a SPORTIME Member.			
Preferred Day/Time (1)	Preferred Coach	Preferred Day/Time (1)	Preferred Coach	Partner Name	
Preferred Day/Time (2)	Preferred Coach	Preferred Day/Time (2)	Preferred Coach	Partner Name	
Preferred Day/Time (3)	Preferred Coach	Preferred Day/Time (3)	Preferred Coach	Partner Name	

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 February 1, March 1 and April 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, or the parent or legal guardian of the named participant, and that I/we 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, in athletic training 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/the named participant 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/the named participant to be physically sound and suffering from no conditions, impairment, disease, infirmity or other illness that would prevent my/the named participant's participation in SPORTIME programs, services and activities. In the case of an accident or injury to me/the named participant, 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 understand that any and all classes or sessions purchased must be used by August 31st of the session year. I also understand that membership is required for participation in certain SPORTIME programs. SPORTIME reserves the right to cancel this contract at any time, at its sole discretion, and SPORTIME's sole liability shall be to refund any amounts previously paid on a pro-rata basis. SPORTIME reserves the right to close courts for repair or alterations. I understand and agree that SPORTIME retains the rights to any photographs or video taken of me and/or the named participant 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. If the named participant is a minor and an email address is provided above, I authorize SPORTIME to contact the named participant at such address directly.

AUTHORIZED SIGNATURE:

DATE:

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 Bethpage Director of Tennis, Wael Kilani Phone: 516-933-8500 | Email: wkilani@sportimeny.com SPORTIME Syosset Tennis Mail: 75 Hasket Drive, Syosset, NY 11791 | Fax: 516-364-3928 Register Online: www.SportimeNY.com/SyossetTennis. If you have questions, please contact JMTA Long Island and Syosset Director of Tennis, Mike Kossoff Phone: 516-364-2727 | Email: mkossoff@sportimeny.com