



SPORTIME RANDALL'S ISLAND  
 One Randall's Island, New York, NY 10035  
 TEL: 212-427-6150 FAX: 212-427-5650  
 www.SportimeNY.com/Manhattan

# TENNIS WHIZZ PROGRAM

## 2018-2019 Program Application

Please complete all fields and print clearly.

### PLAYER INFORMATION

NEW MEMBER  EXISTING MEMBER  EXISTING MEMBER W/CHANGES

PLAYER FIRST NAME \_\_\_\_\_ PLAYER LAST NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ GENDER  MALE  FEMALE SCHOOL ENROLLED 2018-19 \_\_\_\_\_ GRADE \_\_\_\_\_

ALLERGIES / HEALTH RESTRICTIONS (IF ANY) \_\_\_\_\_

PARENT / GUARDIAN FIRST NAME \_\_\_\_\_ PARENT / GUARDIAN LAST NAME \_\_\_\_\_

EMAIL ADDRESS (REQUIRED) \_\_\_\_\_ HOW DO YOU PREFER TO BE CONTACTED?  
 PHONE  EMAIL  TEXT

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMERGENCY CONTACT NAME \_\_\_\_\_ RELATION TO PLAYER \_\_\_\_\_ EMERGENCY PHONE \_\_\_\_\_

HOW DID YOU HEAR ABOUT US?  WORD OF MOUTH  MAIL  WEB  SOCIAL MEDIA  REFERRAL BY \_\_\_\_\_

### PROGRAM COSTS : TENNIS WHIZZ COST IS FOR 17 WEEKS. PRIVATE LESSON COST IS FOR 34 WEEKS.

ITEM	COST	# SESSIONS	TOTAL
<input type="checkbox"/> Tennis Whizz - Group Program Cost - 1 Hour	\$680.00	_____	\$ _____
<input type="checkbox"/> Private Lessons - Elite Coach - 1 Hour	\$6,970.00	_____	\$ _____
<input type="checkbox"/> Private Lessons - Master Coach Plus- 1 Hour	\$6,290.00	_____	\$ _____
<input type="checkbox"/> Private Lessons - Master Coach - 1 Hour	\$5,780.00	_____	\$ _____
<input type="checkbox"/> Private Lessons - Senior Coach Plus - 1 Hour	\$5,440.00	_____	\$ _____
<input type="checkbox"/> Private Lessons - Senior Coach - 1 Hour	\$5,100.00	_____	\$ _____
<input type="checkbox"/> Private Lessons - Staff Coach - 1 Hour	\$4,760.00	_____	\$ _____
<b>SUB-TOTAL</b>			<b>\$ _____</b>
<b>40% REQUIRED DEPOSIT</b>			<b>-\$ _____</b>
<b>BALANCE DUE</b>			<b>\$ _____</b>

For Lesson Rates for JMTA Directors, Associate and Assistant Directors, ATP and Touring Pros, or for help with ½ Hour, 1 ½ Hour or Semi-Private Lessons, please contact us.

### SCHEDULE SELECTION

#### TENNIS WHIZZ

In order for classes to be confirmed, at least four (4) players must be registered.

**YOU CAN ALSO FORM YOUR OWN GROUP!** With a minimum of four (4) players, we will get you started.

- Mondays 3:00pm-4:00pm
- Tuesdays 3:00pm-4:00pm
- Wednesdays 3:00pm-4:00pm
- Thursdays 3:00pm-4:00pm
- Saturdays 3:00pm-4:00pm
- Sundays 3:00pm-4:00pm

\*PLEASE NOTE: While we will make best efforts to grant your coach request, we may be unable to do so in some circumstances, in which case we will recommend one or more alternate member/s of our world-class coaching staff. Coaches' current rates are subject to change for 2018-19 and we will inform you no later than August 1, 2018 if your coach's rate will change.

#### PRIVATE LESSONS

- Private and semi-private lessons are not available on weekdays from 4:00pm-8:00pm.
- For private lessons between 8:00am and 6:00pm, on Saturdays and Sundays, a seasonal court is required.
- Lessons cancelled fewer than 48-hours in advance will be charged in full.

Preferred Day/Time 1: \_\_\_\_\_

Preferred Day/Time 2: \_\_\_\_\_

Preferred Coach\*: \_\_\_\_\_

**TRANSPORTATION** Separate application required. Please check the applicable box below. A 40% deposit will be charged and we will contact you to complete a separate transportation application. For more information, or for immediate assistance, please email [transportationri@sportimeny.com](mailto:transportationri@sportimeny.com).

- SHUTTLE (at school or at designated locations)  34 weeks one way = \$1,020.00  34 weeks round trip = \$2,040.00
- DOOR-TO-DOOR  34 weeks one way = \$1,360.00  34 weeks round trip = \$2,720.00

**REGISTER TODAY!** Complete this application and return with the required deposit by mail, fax or register conveniently online:

Mail: SPORTIME Randall's Island, One Randall's Island, New York, NY 10035 | Fax: 212-427-5650

Online: [www.SportimeNY.com/Manhattan](http://www.SportimeNY.com/Manhattan)

### SESSION SCHEDULE

- Session 1 - 17-Week Session: 9/10/18 - 1/20/19
- Session 2 - 17-Week Session: 1/21/19 - 5/26/19
- No play from 12/22/18 - 1/4/19 and 3/25/19 - 3/31/19

### PAYMENT INFORMATION

**PLEASE CHOOSE ONE OF THE FOLLOWING PAYMENT OPTIONS:**

- CHECK HERE TO CHOOSE SPORTIME'S EASY PAYMENT PLAN - 40% NON-REFUNDABLE DEPOSIT AND 2 TO 3 EQUAL MONTHLY PAYMENTS** The SPORTIME Easy Payment Plan (EPP) requires a 40% non-refundable deposit to reserve a space in any program with 17 and 34 weekly sessions. For 17 week programs, the remaining balance is drafted from a member's valid credit card or bank account in two equal installments, on October 1 and November 1, and for 34 week programs three equal installments on October, November 1 and December 1. 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. Once enrolled in Full Auto Pay, any additional programs or series lessons that a member chooses to charge to his/her SPORTIME member account will be billed and drafted using the EPP schedule. **OR**
- CHECK HERE TO CHOOSE PAYMENT IN FULL BY FIRST DAY OF PLAY** I 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.

By signing below, I agree to adhere to the terms of the payment plan I have chosen. If my account is not paid as required, I consent that SPORTIME may charge my bank account/credit card on file for the full amount past due plus a late fee.

### PAYMENT METHOD

- CREDIT CARD:** I authorize SPORTIME to charge the credit card below.

- MC  Visa  AMEX  Discover

CREDIT CARD NUMBER \_\_\_\_\_ EXPIRATION \_\_\_\_\_

- Please make this my guaranteed form of payment on file.

- BANK ACCOUNT:** I authorize SPORTIME to deduct from the following account.

BANK NAME \_\_\_\_\_ ABA NUMBER \_\_\_\_\_

BANK ACCOUNT NUMBER \_\_\_\_\_

- Please make this my guaranteed form of payment on file.

- CHARGE TO MY ACCOUNT:** Guaranteed form of payment on file required, and I authorize SPORTIME to use it for payment(s) due.

- CHECK PAYABLE TO SPORTIME**

- CASH**

### LIABILITY WAIVER, ASSUMPTION OF RISK AND RELEASE AND OTHER TERMS:

By signing below I agree that I am the parent or legal guardian of the named participant, and that we will abide by all rules and regulations which now exist or which may be hereafter adopted or amended by SPORTIME. I further 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 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 the named participant to be physically sound and suffering from no conditions, impairment, disease, infirmity or other illness that would prevent his/her participation in SPORTIME programs, services and activities. In the case of accident or injury to 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.** 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 alteration. SPORTIME retains the rights to any photographs or video taken at the facility to be used for publicity or advertising. **SPORTIME DOES NOT GUARANTEE MAKE-UPS FOR CLASSES MISSED BY THE PARTICIPANT.** Authorized make-ups can be scheduled only during the designated "make-up week", from May 27, 2019 - June 2, 2019.

PARENT / GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

