SAVE TIME! REGISTER ONLINE!

SUMMER PROGRAMS 2025 Program Application

SUMMER TENNIS PROGRAM SEASON: JUNE 23, 2025 - AUGUST 31, 2025										
PLAYER INFORMATION Please complete all fields and print										
PLAYER: FIRST NAME LAS	T NAME					DATE OF BIRTH		GENDER FEMALE	ПМАІБ	
PLAYER EMAIL ADDRESS (IF PLAYER IS OVER 13)	PLAYER MOBILE N	UMBER (IF O	VER 13)		SC	CHOOL & GRADE ENF	ROLLED SEPT			
STREET ADDRESS ADD	ADDRESS 2			CITY STATE ZIP						
PARENT/GUARDIAN: FIRST NAME LAST	E LAST NAME			EMAIL ADDRESS (REQUIRED)						
MOBILE PHONE HOME PHONE		BUSINESS	PHONE			HOW DO YOU PREF				
EMERGENCY CONTACT: FIRST NAME LAST	LAST NAME			RELATION TO PLAYER		□ PHONE □ EMAIL CONTACT NUMB			⊔ MAIL	
How did you hear about us?				☐ Ad ☐ Referral, who can we thank?						
Program Costs Costs are per person. Payment is due in full upon registration. Private lessons must be completed by August 31, 2025.										
U10 & JUNIOR PROGRAMS		DURAT	ION	10 WEEK CO	OST	# SESSIO	NS	тот	AL	
☐ SPORTIME Bounce		1 Hou	ır	\$300.00						
☐ SPORTIME U10 - Red One/Red Two		1 Hou	ır	\$400.00						
☐ SPORTIME U10 - Orange One		1 Hou	ır	\$450.00						
☐ SPORTIME U10 - Orange Two/Green		1.5 Ho	ur	\$620.00						
☐ SPORTIME EXCEL - Yellow		2 Hou	ır	\$800.00						
PRIVATE LESSONS		DURAT	ION	10 WEEK CO	OST					
☐ Private Lessons - Staff Pro		.5 Hou	ır	\$750.00						
☐ Private Lessons - Master Pro		.5 Hou	ır	\$850.00						
☐ Private Lessons - Director		.5 Hou	ır	\$950.00						
☐ Private Lessons - Staff Pro		1 Hour		\$1,250.00						
☐ Private Lessons - Master Pro		1 Hour		\$1,450.00						
☐ Private Lessons - Director		1 Hou	ır	\$1,550.00)					
ADULT TENNIS KINETICS		DURAT	ION	10 WEEK CO	OST	PER DIEM	COST			
☐ ATK Group Lessons		1 Hou	ır	\$450.00		N/A				
☐ ATK Group Lessons		1.5 Ho	ur	\$550.00		N/A				
☐ SPORTIME Zone		1.5 Hour		\$375.00		\$45.00				
☐ Men's Nightime League - All Levels - 10 Plays		2 Hou	rs	\$300.00		\$35.00				
☐ Doubles League - Sunday: 8am-10am - 10 Plays		2 Hou	rs	\$300.00		\$35.00				
TOTAL										
Schedule Selection Please check boxes that apply. For a	list of 'No Play	' dates, pl	ease visit ι	us online.						
BOUNCE - 1 HOUR			ORAN	NGE TWO/GREEN	l - 1.5 HO	UR				
☐ Tue: 4:00pm - 5:00pm			☐ Thurs: 5:30pm - 7:00pm							
□ Sun: 9:00am - 10:00am			□ Sun: 10:00am - 11:30am							
RED ONE/RED TWO - 1 HOUR			EXCE	L YELLOW - 2 HO	UR					
☐ Tue: 5:00pm - 6:00pm				☐ Thurs: 5:00pm - 7:00pm						
□ Sun: 9:00am - 10:00am				☐ Sun: 12:00pm - 2:00pm						
ORANGE ONE - 1 HOUR Private Lesson/Zones/ATK Program Preferences						es				
☐ Tue: 5:00pm - 6:00pm				RENCES	Preferred	d Coach Partner Name				
☐ Sun: 10:00am - 11:00am								iic		
			Preferr	red Day/Time (2)	Preferred	Coach	Partner Nan	ne		
					l					

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Payment Information

CREDIT CARD		TERMS					
☐ I authorize SPORTIME to charge my credit card on file.		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 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					
☐ Please use this card: ☐ MC ☐ VISA ☐ AMEX ☐ DISCOVER							
CARD NUMBER	EXPIRATION	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					
☐ Check here to make this your guaranteed form of payment on file.		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					
CHARGE TO ACCOUNT		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 reserves the right to close courts for repair or					
☐ I understand that I need a guaranteed form of payment on file, and I authorize SPORTIME to use it for payment(s) due.		alterations. SPORTIME reserves the right to cancel this contract at any time, at its sole discretion, and SPORTIME' sole liability shall be to refund any amounts previously paid on a pro-rata basis. I hereby authorize SPORTIME to contact me by phone, email and/or text message. I understand and agree that SPORTIME retains the rights to am photographs or video taken of me at SPORTIME facilities or at off-site SPORTIME programs or events, to be used					
CHECK OR CASH		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					
□ CHECK # □ CASH	AMOUNT	MISSED, and any make-up authorized must be completed by August 31st of the session year.					
Payment in full is required.		PARENT/GUARDIAN SIGNATURE DATE					
	l						

Register Today!

Complete both sides of this application and return with payment in full by email, or register conveniently online:

SPORTIME Lynbrook

Mail: 175 Merrick Road, Lynbrook, NY 11563
Register Online: www.SportimeNY.com/Lynbrook
Email: lynbrook@sportimeny.com