

SPORTIME Schenectady 2699 Curry Road, Schenectady, NY 12303 TEL: 518-356-0100 | FAX: 518-356-4797 www.SportmeNY.com/Schenectady

How did you hear about us? 🗆 Word of Mouth 🗎 Mail 🗎 Web 🗀 Social Media ______ 🗀 Ad______ 🗀 Referral, who can we thank?_

☐ **Fall 18-Week Session:** Mon, Sept 9, 2024 - Sun, Jan 26, 2025

RED & ORANGE BALL TENNIS 2024-2025 Program Application

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

☐ Full 36-Week Session: Mon, Sept 9, 2024 - Sun, June 15, 2025

Frograms are off 11/28/24-12/1/24, 12/23/24-1/1/25, 2/17/25-2/23/25, 4/14/25-4/20/25, and 5/26/25							
PLAYER INFORMATION Please	complete all fields and pri	nt clearly. Players must be acti	ve SPORTIME Membe	ers to participate in SPOF	TIME progra	ams.	
PLAYER: FIRST NAME	L	LAST NAME		DATE OF BIRTH		GENDER	
PLAYER EMAIL ADDRESS (IF PLAYER IS OV	ER 13)	PLAYER MOBILE NUMBER (IF OVER 1	3)	SCHOOL & GRADE	ENROLLED SEPT		
STREET ADDRESS	A	DRESS 2	CITY		STATE	ZIP	
PARENT/GUARDIAN: FIRST NAME	LA	ST NAME		EMAIL ADDRESS (REQUIR	ED)		
MOBILE PHONE	HOME PHONE	BUSINESS PHON	E	HOW DO YOU F			
				☐ PHONE	☐ EMAIL	⊔ TEXT	□ MAIL
EMERGENCY CONTACT: FIRST NAME	LA	ST NAME	RELATION	TO PLAYER	CONTACT NU	MBER	

Program Costs

Program Costs							
ITEM DESCRIPTION	DURATION	18 WEEK COST	36 WEEK COST	# SESSIONS	TOTAL		
U10 RED ONE: AGES 4-5 - FOAM/RED BALLS - COURT SIZE 36' - FUNDAMENTAL MOVEMENT AND COORDINATION SKILLS							
☐ Training 1 - 1 class/week	1 Hour	\$590.00	\$1,090.00				
☐ Training 2 - 1 class/week	1 Hour	\$975.00	\$1,795.00				
☐ Training 3 - 1 class/week	1 Hour	\$1,250.00	\$2,150.00				
U10 RED TWO: AGES 6-7 - RED BALLS - COURT SIZE 36' - TENNIS DRILLS AND SKILLS IDEAL FOR BEGINNER PLAYERS							
☐ Training 1 - 1 class/week	1 Hour	\$590.00	\$1,090.00				
☐ Training 2 - 2 classes/week	1 Hour	\$975.00	\$1,795.00				
☐ Training 3 - 3 classes/week	1 Hour	\$1,250.00	\$2,150.00				
U10 ORANGE ONE: AGES 8-11 - ORANGE BALLS - COURT SIZE 60' -FOR BEGINNER AND INTERMEDIATE PLAYERS.							
☐ Training 1 - 1 class/week	1 Hour	\$590.00	\$1,090.00				
☐ Training 2 - 2 classes/week	1 Hour	\$975.00	\$1,795.00				
☐ Training 3 - 3 classes/week	1 Hour	\$1,250.00	\$2,150.00				
U10 ORANGE TWO - AGES 8-11 - COURT SIZE 78' - FOR ADVANCED PL	AYERS ON A T	OURNAMENT AND	TEAM TRACK.				
☐ Training 1 - 1 class/week	1 Hour	\$590.00	\$1,090.00				
☐ Training 2 - 2 classes/week	1 Hour	\$975.00	\$1,795.00				
☐ Training 3 - 3 classes/week	1 Hour	\$1,250.00	\$2,150.00				
TOTAL DUE							



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

Schedule Selection Please check boxes that apply. Programs are off 11/28/24-12/1/24, 12/23/24-1/1/25, 2/17/25-2/23/25, 4/14/25-4/20/25, and 5/26/25

U10 RED ONE /TWO and U10 ORANGE ONE/TWO- 1 HOUR								
☐ Mon: 4:00pm - 5:00pm								
□ Wed: 4:00pm - 5:00pm								
☐ Sat: 10:00am - 11:00am								
Payment Plan Please choose one of the options below:								
program, with the remaining balance charged to a member's valid cred For 8-13 week programs, remaining balance to be drafted on the second for 15-18 week programs, remaining balance to be drafted in three For 34-36 programs, remaining balance to be drafted in six (6) eq For enrollment in any SPORTIME program after August 31st, the amount to the deposit. EPP participants MUST enroll in Full Auto Pay, thereby a dues, pro shop charges and per diem court time, from such credit card Membership Agreement, by choosing the EPP, I am hereby authorizing Full Auto Pay, any additional programs or services that members choose	of the month following the month during which the program commences; 3) equal installments, on October 1, November 1 and December 1; or installments on October 1, November 1, December 1, January 1, February 1 and March 1. If any installment payment due, per the schedule above, will be due and payable in addition orizing SPORTIME to draft all club charges due on a monthly basis, including membership bank account. If I did not choose Full Auto Pay as my payment profile on my SPORTIME PORTIME to change such profile to Full Auto Pay, effective immediately. Once enrolled in charge to their SPORTIME accounts will be billed and drafted using the EPP schedule I do not choose the EPP described above, I must remit a 40% non-refundable deposit along							
□ CREDIT CARD								
☐ I authorize SPORTIME to bill my credit card on file.	☐ Please use this card: ☐ 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 full amount.	☐ CHECK ☐ CASH IF CHECK, NO. AMOUNT							
LIABILITY WAIVER, ASSUMPTION OF RISK AND RELEASE AND OTHER TERMS								
be hereafter adopted or amended by SPORTIME. I further agree to adhere to required SPORTIME may charge my bank account/credit card on file for the dangers in playing tennis and in participating in other SPORTIME programs, submage, or other loss sustained by the named participant in, on or about the or other property of SPORTIME. I hereby further declare the named participather illness that would prevent the named participant's participation in SPO participant, and if an emergency contact person cannot be reached, I grant stresponsible. I accept that enrollment in SPORTIME programs is for the full segins. I also understand that membership is required for participation in at its sole discretion, and SPORTIME's sole liability shall be to refund any am for participation in certain SPORTIME programs. SPORTIME reserves the right rights to any photographs or video taken of the named participant at SPORT marketing, social media and advertising. SPORTIME's Privacy Policy can be visited.	rticipant, and that we will abide by all rules and regulations which now exist or which may e terms of the payment plan I have chosen above, and that if my account is not paid as amount past due plus a late fee. I acknowledge and agree that there are certain inherent vices and activities, and that SPORTIME shall not be liable for any personal injuries, property remises of SPORTIME, or arising out of the use or intended use of any facilities, equipment to be physically sound and suffering from no conditions, impairment, disease, infirmity or IME programs, services and activities. In the case of an accident or injury to the named RTIME permission to obtain medical attention, if necessary, for which I will be financially sion and that no refunds will be given for withdrawals or absences after the session rain SPORTIME programs. SPORTIME reserves the right to cancel this contract at any time, this previously paid on a pro-rata basis. I also understand that membership is required to close courts for repair or alteration. I understand and agree that SPORTIME retains the if acilities or at off-site SPORTIME programs or events, to be used for SPORTIME publicity, and at the such address directly. SPORTIME DOES NOT GUARANTEE MAKE-UPS FOR CLASSES and the substant by the programs of the part of the substant by the part of services.							
	npieted by January 26, 2025 (Fall Session) and June 15, 2025 (Spring Session).							

Register Today!

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