

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

PROGRAMS: D Spring 17-Week Session: Sun, Feb 2, 2025 - Sun, June 22, 2025 LEAGUES: D Spring 16-Week Session: Mon, Jan 27, 2025 - Mon, Jun 2, 2025

PLAYER INFORMATION Please complete all fields and print clearly. Players must be active SPORTIME Members to participate 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:		
				PHONE EMAIL TEXT MAIL		
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 □ Refer	ral, who can we thank?		

Program Costs

ITEM DESCRIPTION	DURATION	12 Weeks	17 WEEKS	# SESSIONS	TOTAL
Adult - After Work Program	1.5 Hour	N/A	\$1,095.00		
Adult - Group Lessons	1.5 Hour	\$1,095.00	\$1,250.00		
□ Road to Nationals	1.5 Hour	\$1,035.00	\$1,195.00		
□ Road to Nationals	2 Hour	N/A	\$1,475.00		
SPORTIME Launch - up to 5 players	1 Hour	N/A	\$825.00		
SPORTIME Launch -up to 5 players	1.5 Hour	N/A	\$1,050.00		
ITEM DESCRIPTION	DURATION		16 WEEKS	# SESSIONS	TOTAL
Leagues - Women's Doubles	1.5 Hour		\$575.00		
ITEM DESCRIPTION	DURATION		MEMBERS	NON-MEMBERS	TOTAL
□ The Nighttime Zone - PER DIEM	1.5 Hour		\$50.00	\$65.00	
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.

ADULT GROUP LESSONS						
Preferred	Day/Time (1)	Preferred Coach				
Preferred	Day/Time (2)	Preferred Coach				
THE SPORTIME LAUNCH 2.5-3.0						
Preferred	Preferred Day/Time (1) Preferred Coach					
Preferred Day/Time (2) Preferred Coach						
LEAGUES - 1.5 HOUR						
🗆 Wo	omen's Doubles	3.0-3.5	Mon: 11:00am - 12:30pm			
D Wo	omen's Doubles	4.0 USTA	Thur: 10:30am - 12:00pm			

ROAD TO NATIONALS - 1.5 HOUR		THE NIGHTTIME ZONE - 1.5 HOUR
□ 3.0	Tue: 9:30am - 11:00am	□ Tues: 8:00pm - 9:30pm
3.0-3.5	Wed: 9:30am - 11:00am	□ Wed: 8:00pm - 9:30pm
3.0-3.5	Fri: 9:00am - 10:30am	□ Thur: 8:00pm - 9:30pm
3.0-3.5	Fri: 10:30am - 12:00pm	
□ 3.5	Mon: 10:00am - 11:30am	ROAD TO NATIONALS - 2 HOUR
□ 3.5	Thur: 9:30am - 11:00am	Tues: 10:30am - 12:30pm
□ 4.0	Mon: 10:00am - 11:30am	AFTER WORK PROGRAM - 1.5 HOUR
□ 4.5	Fri: 9:30am - 11:00am	□ Tues: 8:00pm - 9:30pm
		□ Wed: 8:00pm - 9:30pm

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□ AMEX □ DISCOVER

Payment Information Please select your payment method:							
CREDIT CARD							
I authorize SPORTIME to bill my credit card on file.		□ Please use this card:	□ мс	□ VISA			
CARD NUMBER	EXPIRATION						

		□ Select to	o make this your g	guaranteed form of payment o	n 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

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 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 sporgrams. SPORTIME reserves the right to close courts for repair or alterations. SPORTIME reserves the right to close courts for repair or alterations. 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. I understand and agree that 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

AUTHORIZED SIGNATURE:

DATE:

Register Today!

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

SPORTIME Roslyn

 Mail: 1 Landing Road, Roslyn, NY 11576

 Phone: 516-484-9222 | Text: 516-464-0306 | Register Online: www.SportimeNY.com/Roslyn.

 If you have questions, please contact: Roslyn Director of Adult Programs, Jordan Kotzagiannidis Email: jordan@sportimeny.com

 OR Roslyn League Director, Jerilyn Jud Email: jjud@sportimeny.com