

SPORTIME offers the finest tennis programming for young players, supervised by a world-class staff of experienced tennis coaches, all at the largest, most beautiful facility in the Hamptons. Our summer programs challenge and progress our students, while enhancing their fitness and confidence and providing positive social interaction. Check out SPORTIME's unique, cutting-edge junior tennis programs - and sign up now!

SPORTIME/JMTA U10 Programs - Ages 3-9

SPORTIME'S U10 Mac Red and Mac Orange programs guide our youngest, newest players through clearly defined stages of development that follow a progression of court sizes, ball types (red and orange) and net heights, making it possible for kids to actually play tennis from the moment they step on the court. SPORTIME U10 Tennis combines the best principles of child learning with world-class tennis instruction to create a truly innovative and engaging program. Our "gamification" approach, that allows players to go on missions, acquire skills, collect points and achieve milestones, is a part of SPORTIME's fun and challenging environment, where our kids are encouraged to take risks, to use their intellect and to find solutions. If you think all U10 programs are alike, they are not. Get your child into the game at SPORTIME!

Looking for full-day tennis training, for enthusiastic young players ready to train with the green dot or yellow ball on the 78' court? Then our JMTA Summer Training Camp is for you! For more information or to register, please log onto www.SportimeCamps.com/JMTA-AM or call or text (631) 267-1038.

Junior Tennis Kinetics - Ages 10+

(for players who have progressed to green or yellow ball)

JTK, SPORTIME'S well-established instructional and recreational junior tennis clinic, has been revamped for the 2023 season and focuses on students who have progressed to playing with either low-compression green or standard yellow balls. JTK aims to develop the whole player – physically, mentally, tactically and technically – and encourages students to master key fundamentals, including movement, balance, agility and rally skills, which provide the foundation for them to become complete players.

SPORTIME'S coaching philosophy is designed to help our students learn how to play the game (the tactical) and to give them the means to execute those tactics (the technical). Our tactical games are designed so that students get to perfect and practice winning tactics in "live ball" point situations in each session. Keep your child progressing and loving the game at SPORTIME!

Program Schedules:

- JTK Yellow: June 9 Aug 30/ Mon, Wed, Fri & Sat
- JTK Green: June 9 Aug 30 / Mon, Wed, Fri & Sat
- U10/Orange: June 10 Aug 30 / Tue, Thur & Sat
- U10/Red: June 10 Aug 30 / Tue, Thur & Sat
- Parent/Child Tournament: Aug 16
- USTA/UTR Tournaments



Register Today!

To register, complete the application on the back. Or contact us by calling or texting (631) 267-1038 or emailing amagansett@sportimenv.com.



(631) 267-1038

SPORTIME Amagansett 320 Abrahams Path, Amagansett, NY 11930 www.SportimeNY.com/Amagansett



APT/P.O.BOX

LAST NAME

Player Information Please complete all fields and print clearly.

PLAYER EMAIL ADDRESS (IF 13 AND OVER)

PARENT/GUARDIAN 1: FIRST NAME

BILLING ADDRESS

SPORTIME AMAGANSETTSummer Junior Tennis Programs Application 2025

SCHOOL & GRADE ENROLLED SEPT

EMAIL ADDRESS (REQUIRED)

DATE OF BIRTH

☐ EXISTING MEMBER ☐ NEW MEMBER

GENDER

☐ FEMALE ☐ MALE ☐ NON-BINARY

HOME PHONE

TENNIS PROGRAM SEASON: JUNE 9, 2025 - AUGUST 30, 2025

MOBILE PHONE

PLAYER MOBILE NUMBER (IF 13 AND OVER)

| PARENT/GUARDIAN 2: FIRST NAME LAST NAM | ΛΕ. | | MOBILE PHONE | EMAIL | ADDRESS (REQUIRE | <u>-D)</u> | | | |
|---|---------------------------------|----------------------------------|---|---------------------------------|-------------------------------|---|--|--|--|
| PARENT/GUARDIAN 2. FIRST NAIVIE LAST NAIV | 'IL | ' | MOBILE PHONE | EIVIAIL | ADDRESS (REQUIRE | D) | | | |
| EMERGENCY CONTACT: FIRST NAME LAST NAME | IE . | I | RELATION TO PLAYER | | CONTACT NUMBI | ER | | | |
| ALLERGIES / HEALTH RESTRICTIONS | НС | W DID YOU HEAR ABO | OUT US? | | | | | | |
| | | Word of Mouth | □ Mail □ Web | □ Instagram | ☐ Facebook | ☐ Twitter ☐ Print A | d 🛘 Referral | | |
| | | | | | | | | | |
| Program Costs Please select the program you are reg OR NO SHOWS, WILL RESULT IN A FULL CHARGE. ALL S | istering for and SUMMER CLAS | select program of SES MUST BE US | dates. PLEASE NC SED BY NOVEMB | OTE, ANY CANO ER 9, 2025. Ma | CELLATIONS Marke-up classes a | ADE LESS THAN 24 are available for class | HOURS IN ADVANCE ses cancelled due to | | |
| inclement weather. | | | | | · | | | | |
| ITEM DESCRIPTION | | DURATION | DAILY | 5 + CLASSES | 10 + CLASSE | S #PACKAGE/DAY | rs total | | |
| ☐ U10/MAC Red Ball - Tues, Thurs & Sat 4pm - 5pm | | 1 Hour | \$55.00 | \$260.00 | \$495.00 | | | | |
| ☐ U10 Orange Ball - Tues, Thurs & Sat 4pm- 5:30pm | | 1.5 Hour | \$85.00 | \$385.00 | \$725.00 | | | | |
| ☐ JTK Green Ball - Mon, Wed, Fri & Sat 4pm - 5:30pm | | 1.5 Hour | \$85.00 | \$385.00 | \$725.00 | | | | |
| ☐ JTK Yellow Ball - Mon, Wed, Fri & Sat 4pm - 5:30pm | | 1.5 Hour | \$85.00 | \$385.00 | \$725.00 | | | | |
| ☐ Parent/Child Tournament - Aug 17 - Free for Memb | | | | | | | | | |
| PROGRAM TOTAL | | | | | | | | | |
| PAYMENT IN FULL IS DUE UPON REGISTRATION - Call or Text (631) 267-1038 to sign-up for drop-in classes | | | | | | \$ | | | |
| | | | | | | | | | |
| Schedule Selection Please check all weeks/or indiv | | | | | | | | | |
| SELECT WEEK | SELECT WEEK | | | | SELECT WEEK | | | | |
| □ WEEK 1: JUN 9 - JUN 14 | □ WEEK 5: JU | | | | | | WEEK 9: AUG 4 - AUG 8 | | |
| ☐ WEEK 2: JUN 16 - JUN 21 | | (6: JUL 14 - JUL 1 | | | | □ WEEK 10: AUG 11 - AUG 16 | | | |
| WEEK 3: JUN 23 - JUN 28 | | | ': JUL 21 - JUL 26 | | | □ WEEK 11: AUG 18 - AUG 23 | | | |
| ☐ WEEK 4: JUN 30- JUL 5 | ☐ WEEK 8: JUL 28 - AUG 2 | | | | □ WEEK 12: AUG 25 - AUG 30 | | | | |
| Payment Information Please select your Payment | Method and A | gree to Payment | Terms. | | | | | | |
| CREDIT CARD | | | PAYMENT, LIABILY WAIVER, ASSUMPTION OF RISK AND RELEASE AND OTHER TERMS | | | | | | |
| ☐ I authorize SPORTIME to charge my credit card on file. | | | I understand that payment in full is required to enroll in Sportime Clubs, LLC ("SPORTIME") Junior Tennis Programs in Amagansett, and consent that SPORTIME may charge the credit card I have provided for the full amount due. By signing below | | | | | | |
| ☐ Please use this card: ☐ MC ☐ VISA ☐ AMEX ☐ DISCOVER | | | 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 | | | | | | |
| CARD NUMBER EXPIRATION CVV ZIP | | | IME shall not be liable | for any personal in | uries, property dam | nage, or other loss sustaine | ed by the named participant | | |
| | | property of | SPORTIME. I hereby for | urther declare the r | amed participant to | | suffering from no conditions, | | |
| ☐ Check here to make this your guaranteed form of payment on file. | | | impairment, disease, infirmity or other illness that would prevent the named participant's 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 no refunds will be given for withdrawals or for unused program sessions and that all sessions must be used before | | | | | | |
| CHARGE TO ACCOUNT | | November | 9, 2025. I understand t | that if a session is n | ot canceled at least 2 | 24 hours in advance, or if | a "no-show" occurs, I am | | |
| ☐ I understand that I need a guaranteed form of payment on file, and I authorize SPORTIME to use it for payment(s) due. | | | responsible for payment of the full session fee. I also accept that SPORTIME does not guarantee make-ups for missed sessions. 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. I understand and agree that SPORTIME retains the rights to any photographs or video taken of the named participant at SPORTIME facilities or at off-site SPORTIME programs or events, to be used for SPORTIME publicity, marketing, social media | | | | | | |
| CHECK OR CASH | | and advert | ising. SPORTIME's Priva | acy Policy can be vie | wed at: https://www | w.sportimeny.com/privacy | y_policy.php. If the named | | |
| □ CHECK # □ CASH | AMOUNT | | participant's email address is provided above, I autho PARENT/GUARDIAN SIGNATURE | | | DATE | and at such address directly. | | |
| Payment in full is required. | | | | | | | | | |
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