



**SPORTIME QUOGUE**  
 2571 Quogue-Riverhead Road, East Quogue, NY 11942  
 TEL: (631) 653-6767 | FAX: (631) 653-8315  
 www.SportimeCamps.com/QUO

**SUMMER PROGRAMS**  
**2025 Program Application**

**SUMMER TENNIS PROGRAM SEASON: JUNE 23, 2025 - AUGUST 29, 2025**

**PLAYER INFORMATION** Please complete all fields and print clearly.

PLAYER: FIRST NAME		LAST NAME		DATE OF BIRTH	GENDER <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE
PLAYER EMAIL ADDRESS (IF PLAYER IS OVER 13)		PLAYER MOBILE NUMBER (IF OVER 13)		SCHOOL & GRADE ENROLLED SEPT	
STREET ADDRESS	ADDRESS 2	CITY	STATE	ZIP	
PARENT/GUARDIAN: FIRST NAME		LAST NAME		EMAIL ADDRESS (REQUIRED)	
MOBILE PHONE	HOME PHONE	BUSINESS PHONE	HOW DO YOU PREFER TO BE CONTACTED: <input type="checkbox"/> PHONE <input type="checkbox"/> EMAIL <input type="checkbox"/> TEXT <input type="checkbox"/> MAIL		
EMERGENCY CONTACT: FIRST NAME		LAST NAME		RELATION TO PLAYER	CONTACT NUMBER

How did you hear about us?  Word of Mouth  Mail  Web  Social Media \_\_\_\_\_  Ad \_\_\_\_\_  Referral, who can we thank? \_\_\_\_\_

**Program Costs** Costs are per person. Payment is due in full upon registration.

U10 PROGRAMS - 10 WEEKS	DURATION	MEMBER COST	NON-MEMBER COST	PER DIEM	# SESSIONS	TOTAL
<input type="checkbox"/> SPORTIME Bounce	1 Hour	\$325.00	\$325.00	\$40.00		
<input type="checkbox"/> SPORTIME U10 - Red Ball	1 Hour	\$365.00	\$425.00	\$45.00		
<input type="checkbox"/> SPORTIME U10 - Orange Ball	1 Hour	\$420.00	\$480.00	\$55.00		
JUNIOR PROGRAMS - 10 WEEKS	DURATION	MEMBER COST	NON-MEMBER COST	PER DIEM	# SESSIONS	TOTAL
<input type="checkbox"/> EXCEL Green Ball	1.5 Hour	\$645.00	\$720.00	\$70.00		
<input type="checkbox"/> EXCEL Yellow Ball	2 Hour	\$910.00	\$1,010.00	\$95.00		
<b>TOTAL</b>						

**Schedule Selection** Please check boxes that apply.

**BOUNCE - 1 HOUR**

Tue: 4:00pm - 5:00pm

Thur: 4:00pm - 5:00pm

**RED BALL - 1 HOUR**

Tue: 4:00pm - 5:00pm

Thur: 4:00pm - 5:00pm

**ORANGE BALL - 1 HOUR**

Tue: 4:00pm - 5:00pm

Thur: 4:00pm - 5:00pm

**EXCEL GREEN - 1.5 HOUR**

Mon: 4:00pm - 5:30pm

Wed: 4:00pm - 5:30pm

**EXCEL YELLOW - 2 HOUR**

Mon: 4:00pm - 6:00pm

Wed: 4:00pm - 6:00pm

**Register Today!** Complete both sides of this application and return with full payment amount by email or online:  
 Email: [quogue@sportimenny.com](mailto:quogue@sportimenny.com) / Online: [www.SportimeNY.com/Quogue](http://www.SportimeNY.com/Quogue)  
 If you have questions, please contact: SPORTIME Quogue, at 631-653-6767 or Email: [quogue@sportimenny.com](mailto:quogue@sportimenny.com)



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**Payment Information**

**CREDIT CARD**

I authorize SPORTIME to charge my credit card on file.

Please use this card:  MC  VISA  AMEX  DISCOVER

CARD NUMBER	CVV	EXPIRATION DATE	ZIP CODE
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Check here to make this your guaranteed form of payment on file.

**CHARGE TO ACCOUNT**

I understand that I need a guaranteed form of payment on file, and I authorize SPORTIME to use it for payment(s) due.

**CHECK OR CASH**

CHECK # \_\_\_\_\_  CASH

AMOUNT
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**Payment in full is required.**

**PAYMENT, 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 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 programs. 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 hereby authorize SPORTIME to contact me by phone, email and/or text message. 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, social media and advertising. SPORTIME's Privacy Policy can be viewed at: [https://www.sportimeny.com/privacy\\_policy.php](https://www.sportimeny.com/privacy_policy.php). SPORTIME DOES NOT GUARANTEE MAKE-UPS FOR CLASSES MISSED, and any make-up authorized must be completed by August 31st of the session year.

PARENT/GUARDIAN SIGNATURE	DATE
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**Register Today!**

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

**SPORTIME Quogue**

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**Fax:** 631-653-8315 | **Register Online:** [www.SportimeNY.com/Quogue](http://www.SportimeNY.com/Quogue).

**Questions?** Contact Quogue Director of Tennis, Ivan Mardones: **Phone:** 631-653-6767 | **Email:** [imardones@sportimeny.com](mailto:imardones@sportimeny.com)