



Eager ExplorersDay Care 2025-2026 Session: September 4, 2025 - June 26, 2026 (38 Weeks)

PARTICIPANT INFORMATION Please complete all fields and print clearly.

FIRST NAME	LAST NAME	DATE OF BIRTH	GENDER	
STREET ADDRESS		ADDRESS 2 (APT #)	CITY	STATE ZIP
SECONDARY ADDRESS (IF APPLIES) STREET ADDRESS		ADDRESS 2 (APT #)	CITY	STATE ZIP

PARENT/GUARDIAN INFORMATION

FIRST NAME	LAST NAME	DATE OF BIRTH	GENDER	
EMAIL ADDRESS	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
HOW DID YOU HEAR ABOUT US? <input type="checkbox"/> WEB <input type="checkbox"/> PRINT AD <input type="checkbox"/> SOCIAL MEDIA <input type="checkbox"/> WORD OF MOUTH <input type="checkbox"/> OTHER <input type="checkbox"/> REFERRAL _____				

ITEM DESCRIPTION: PRICES LISTED ARE PER WEEK FOR THE FULL 38-WEEK 2025-2026 SESSION

	3 DAYS WEEKLY FEE	4 DAYS WEEKLY FEE	5 DAYS WEEKLY FEE	TOTAL WEEKLY FEE
<input type="checkbox"/> Toddler Sprouts: Ages 2-3 (9:00am-2:30pm)	\$310.00	\$345.00	\$375.00	
<input type="checkbox"/> Preschool Explorers: Ages 3-4 (9:00am-2:30pm)	\$285.00	\$320.00	\$350.00	
<input type="checkbox"/> Pre-Kinder Adventurers: Ages 4-5 (9:00am-2:30pm)	\$285.00	\$320.00	\$350.00	
TOTAL COST				\$

PAYMENT TERMS AND AUTHORIZATION

I authorize SPORTIME to charge the credit card/debit card I have provided below for the weekly tuition fee, set forth above, and understand that I am enrolling for the full 38-week 2025-2026 session. The weekly tuition fee will be charged each Friday for the following week. I understand that it is my responsibility to ensure that my payment information is current at all times.

CREDIT CARD/DEBIT CARD

<input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER			
CARD NUMBER	CARD EXPIRATION	CVV	ZIP CODE

Register Today! Complete both sides of this application

LIABILITY WAIVER, ASSUMPTION OF RISK AND RELEASE

1. I agree that there are certain inherent dangers in participating in SPORTIME programs, services and other activities, and in using related equipment and machinery. In consideration of my child/ren being allowed to participate in the programs, services and activities of SPORTIME and to use its facilities, equipment and machinery, in addition to the payment of any fee or charge, to the fullest extent permitted by law, I do hereby waive, release and forever discharge SPORTIME and its partners, members, officers, agents, employees, representatives, executors and any others acting on their behalves, from any and all responsibility or liability arising from injuries or damage resulting from, or in any way arising out of or connected with my children's participation in any activities, programs and services of the SPORTIME or from my child/ren's use of its facilities, equipment and machinery.
2. I understand and agree that sports and fitness activities, including the use of related equipment and machinery, are potentially hazardous activities, which can potentially result in serious injury and even death. I agree that I am voluntarily allowing my child/ren to participate in these activities and to SPORTIME's equipment and machinery with knowledge of the dangers involved. I hereby agree to expressly assume and accept any and all risks of injury or death to my child/ren. In the case of an accident or injury to my child/ren, 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.
3. I do hereby further declare my child/ren to be physically sound and suffering from no conditions, impairment, disease, infirmity or other illness that would prevent my child/ren's participation in SPORTIME programs, services and activities and/or my child/ren's use of related equipment and machinery. I do hereby acknowledge that I have been informed of the need for a physician to approve my child/ren's participation in such programs, services and activities, and my child/ren's use of related equipment and machinery. I also acknowledge that SPORTIME has recommended that my child/ren have an annual or more frequent physical examination and consultation with a physician so that I might have such physician's recommendations concerning my child/ren's participation in such programs, services and activities, and use of such machinery and equipment. I acknowledge that my child/ren have either had a physical examination and been given my physician's permission to participate in SPORTIME programs, services and activities, and to use related equipment and machinery, or that I have decided to allow my child/ren to do so, without the approval of a physician, and do hereby assume all responsibility for my child/ren's participation in such activities and use of such equipment and machinery.

OTHER TERMS

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, including, but not limited to, those set forth in the Eager Explorer's Parent Handbook. I understand that SPORTIME reserves the right to cancel this contract at any time, in 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 some or all of its facilities for repair or alteration.

AUTHORIZED SIGNATURE By signing below, I acknowledge that I have read this entire Agreement, the above and reverse side, including, but not limited to, the Payment Terms and Authorization, the Liability Waiver, Assumption of Risk and Release, and the Other Terms, and I agree to be bound by its terms and conditions.

PARENT/GUARDIAN

SIGNATURE

DATE

SPORTIME AUTHORIZED SIGNATURE

TITLE

DATE

Register Today!

Complete both sides of this application and return with payment in full by mail, or email.

SPORTIME Schenectady
 Mail: 2699 Curry Road, Schenectady, NY 12303
 Fax: 518-356-4797 | Register Online: www.SportimeNY.com/Schenectady
 Questions? Contact Schenectady Eager Explorers Daycare Director, Brie Lawrence:
 Phone: 518-356-0100 | Email: blawrence@sportimeny.com