Adult Tennis Programs & Leagues Spring 2026 Program Application

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

PLAYER INFORMATION Please complete all fields and print clearly. Players must be active SPORTIME Members to participate in SPORTIME programs.					
PLAYER: FIRST NAME	LAST NA	ME		DATE OF BIRTH	GENDER
					□ FEMALE □ MALE
EMAIL ADDRESS (REQUIRED)		NTRP RATING	DO YOU PLAY USTA?	PLAYE	R UNIVERSAL TENNIS RATING
			☐ YES ☐ NO		
STREET ADDRESS	ADDRESS	5 2	CITY	STATE	ZIP
MOBILE PHONE	HOME PHONE BUSINESS PHONE		HOW DO YOU PREFER TO BE CONTACTED:		
				☐ PHONE ☐ EMAI	L 🗆 TEXT 🗆 MAIL
EMERGENCY CONTACT: FIRST NAME	LAST NAI	ME	RELATION TO PLAYER	CONTAC	T NUMBER
How did you hear about us? □ w	ord of Mouth	□ Social Media	□ Ad □ Refe	erral, who can we thank?	

Program Costs Membership is required for all programs and does not end when programs end.

ITEM DESCRIPTION	DURATION	17 WEEKS	# SESSIONS	TOTAL
☐ ATK 2.5 - Formerly known as Beginner Drills	1.5 Hour	\$795.00		
☐ ATK Group Tennis Lessons	1 Hour	\$875.00		
☐ ATK Group Tennis Lessonss	1.5 Hour	\$1,150.00		
☐ The SPORTIME Zone	1.5 Hour	\$725.00		
ITEM DESCRIPTION	DURATION	16 WEEKS	# SESSIONS	TOTAL
☐ TEAM ATK League Tennis - Women's Singles	1.5 Hour	\$455.00		
☐ TEAM ATK League Tennis - Women's Doubles	1.5 Hour	\$395.00		
☐ TEAM ATK League Tennis - Evening - Men's Singles	1.5 Hour	\$515.00		
☐ TEAM ATK League Tennis - Evening - Women's Doubles	1.5 Hour	\$515.00		
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.

DAYTIME TEAM ATK LEAGUE TENNIS 1.5 HOUR			
☐ Daytime - Women's Singles	3.0-3.5	Thur: 11:00am - 12:30pm	
☐ Daytime - Women's Singles	4.0+	Thur: 9:30am - 11:00am	
☐ Daytime - Women's Singles	4.0/3.5	Sat: 8:00am - 9:30am	
☐ Daytime - Women's Doubles	2.5-3.0	Tue: 12:30pm - 2:00pm	
☐ Daytime - Women's Doubles	Fixed - 4.0/3.5	Mon: 9:30am - 11:00am	
☐ Daytime - Women's Doubles	Fixed - 3.5+	Mon: 11:00am - 12:30pm	
☐ Daytime - Women's Doubles	Fixed - 4.0+/4.5	Tue: 9:30am - 11:00am	
☐ Daytime - Women's Doubles	RR - 3.0	Tue: 11:00am - 12:30pm	
☐ Daytime - Women's Doubles	RR - 4.0/3.5	Fri: 9:30am - 11:00am	
☐ Daytime - Women's Doubles	RR - 4.0	Wed: 9:30am - 11:00am	

EVENING TEAM ATK LEAGUE TENNIS S - 1.5 HOUR				
☐ Evening - Women's Doubles	RR - 3.5+/4.0	Tue: 8:00pm - 9:30pm		
☐ Evening - Women's Doubles	RR - 4.5+/5.0	Mon: 8:00pm - 9:30pm		
☐ Evening - Men's Singles	3.0	Tue: 9:30pm - 11:00pm		
☐ Evening - Men's Singles	3.5	Mon: 9:30pm - 11:00pm		
☐ Evening - Men's Singles	4.0	Thur: 9:30pm - 11:00pm		
☐ Evening - Men's Singles	4.0+/4.5	Wed: 9:00pm - 10:30pm		

THE SPORTIME ZONE - 1.5 HOUR		ATK 2.5 - 1.5 HR		
□ 2.5/3.0	Thurs: 12:30pm - 2:00pm	☐ Tue: 12:30pm - 2:00pm		
□ 3.0/3.5	Thur: 8:00pm - 9:30pm	☐ Thur: 12:30pm - 2:00pm		
□ 3.5/4.0	Fri: 11:00am - 12:30pm	☐ Sun: 8:30am - 10:00am		

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☐ NEW MEMBER ☐ EXISTING MEMBER ☐ EXISTING MEMBER W/CHANGES

Payment Information Please select your payment method:						
□ CREDIT CARD						
\square I authorize SPORTIME to bill my credit card on file.	☐ Please use this card: ☐	I MC □ VISA □ AMEX □	l discover			
CARD NUMBER EXPIRATION CVV ZIP	☐ 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			
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 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.						
OPTION B: PAYMENT IN FULL BY FIRST DAY OF PLAY I understand that if I do along with this application to confirm registration, and that the remaining bala that if I am paying by check or by cash, and am not paying in full upon submitt of payment on file, and that SPORTIME is authorized to charge that card for an	ance must be paid in full by thing this application, that I mu	ne first day of play. I further ur	nderstand and agree			

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 premission 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 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.

AUTHORIZED SIGNATURE: DATE:

Membership is required for all programs and does not end when programs end.

Register Today!

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

SPORTIME Lynbrook

Mail: 175 Merrick Road, Lynbrook, NY 11563

Text: 516-464-0265 | Register Online: www.SportimeNY.com/Lynbrook

Questions? Contact Lynbrook Adult Tennis Director, Tina Buschi: Phone: 516-887-1330 | Email: tbuschi@sportimeny.com