



**SPORTIME Hempstead Lake**  
 1000 Lake Drive, West Hempstead, NY 11552  
 TEL: (516) 282-7222  
 www.SportimeNY.com/HempsteadLake

**ADULT SUMMER PROGRAMS**  
**2026 Program Application**

**SUMMER TENNIS PROGRAM SEASON: SATURDAY, JUNE 27, 2026 - SUNDAY, AUGUST 30, 2026 - OFF JULY 4, 2026 & JULY 5, 2026**

**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? <input type="checkbox"/> Word of Mouth <input type="checkbox"/> Mail <input type="checkbox"/> Web <input type="checkbox"/> Social Media _____ <input type="checkbox"/> Ad _____ <input type="checkbox"/> Referral, who can we thank? _____					

**Program Costs** Costs are per person. Payment is due in full upon registration. Private lessons must be completed by August 31, 2026. INCLEMENT WEATHER MAKE-UPS ONLY.

ADULT TENNIS KINETICS	DURATION	9 WEEK COST	PER DIEM COST	TOTAL
<input type="checkbox"/> ATK Group Lessons	1 Hour	<input type="checkbox"/> \$400.00	<input type="checkbox"/> \$50.00	
<input type="checkbox"/> ATK Group Lessons	1.5 Hour	<input type="checkbox"/> \$500.00	<input type="checkbox"/> \$60.00	
<input type="checkbox"/> SPORTIME Zone	1.5 Hour	<input type="checkbox"/> \$350.00	<input type="checkbox"/> \$40.00	
PRIVATE LESSONS	DURATION	10 WEEK COST	PER DIEM COST	
<input type="checkbox"/> Private Lessons - Staff Pro	.5 Hour	<input type="checkbox"/> \$700.00	<input type="checkbox"/> \$80.00	
<input type="checkbox"/> Private Lessons - Senior Pro	.5 Hour	<input type="checkbox"/> \$775.00	<input type="checkbox"/> \$85.00	
<input type="checkbox"/> Private Lessons - Master Pro	.5 Hour	<input type="checkbox"/> \$825.00	<input type="checkbox"/> \$90.00	
<input type="checkbox"/> Private Lessons - Director	.5 Hour	<input type="checkbox"/> \$925.00	<input type="checkbox"/> 100.00	
<input type="checkbox"/> Private Lessons - Director Plus	.5 Hour	<input type="checkbox"/> \$1,075.00	<input type="checkbox"/> \$115.00	
<input type="checkbox"/> Private Lessons - Staff Pro	1 Hour	<input type="checkbox"/> \$1,250.00	<input type="checkbox"/> \$135.00	
<input type="checkbox"/> Private Lessons - Senior Pro	1 Hour	<input type="checkbox"/> \$1,350.00	<input type="checkbox"/> \$145.00	
<input type="checkbox"/> Private Lessons - Master Pro	1 Hour	<input type="checkbox"/> \$1,500.00	<input type="checkbox"/> \$160.00	
<input type="checkbox"/> Private Lessons - Director	1 Hour	<input type="checkbox"/> \$1,700.00	<input type="checkbox"/> \$180.00	
<input type="checkbox"/> Private Lessons - Director Plus	1 Hour	<input type="checkbox"/> \$1,850.00	<input type="checkbox"/> \$195.00	
<b>TOTAL</b>				
LEAGUES - 9 PLAYS		COST	PER DIEM	TOTAL
<input type="checkbox"/> Women's Doubles 3.0		\$250.00	\$30.00	
<input type="checkbox"/> Women's Doubles 3.5		\$250.00	\$30.00	
<input type="checkbox"/> Women's Doubles 4.0		\$250.00	\$30.00	
<b>TOTAL</b>				

**Private Lesson/Zone/ATK Program Preferences**

PREFERENCES		
Preferred Day/Time (1)	Preferred Coach	Partner Name
Preferred Day/Time (2)	Preferred Coach	Partner Name
Preferred Day/Time (3)	Preferred Coach	Partner Name

**Register Today!** Complete both sides of this application and return with full payment amount for programs and lessons by email or online:  
 Email: [hempstead@sportimeny.com](mailto:hempstead@sportimeny.com) / Online: [www.SportimeNY.com/HempsteadLake](http://www.SportimeNY.com/HempsteadLake)  
 If you have questions, please contact: SPORTIME Hempstead Lake, at 516-282-7222 or Email: [hempstead@sportimeny.com](mailto:hempstead@sportimeny.com)



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**Payment Information**

CREDIT CARD			
<input type="checkbox"/> I authorize SPORTIME to charge my credit card on file.			
<input type="checkbox"/> Please use this card: <input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER			
CARD NUMBER	EXPIRATION	CVV	ZIP
<input type="checkbox"/> Check here to make this your guaranteed form of payment on file.			
CHARGE TO ACCOUNT			
<input type="checkbox"/> 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			AMOUNT
<input type="checkbox"/> CHECK # _____ <input type="checkbox"/> CASH			
<b>Payment in full is required.</b>			

PAYMENT, LIABILITY WAIVER, ASSUMPTION OF RISK AND RELEASE AND OTHER TERMS	
<p>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: <a href="https://www.sportimemy.com/privacy">https://www.sportimemy.com/privacy</a>. SPORTIME DOES NOT GUARANTEE MAKE-UPS FOR CLASSES MISSED, and any make-up authorized must be completed by August 31st of the session year.</p>	
PARENT/GUARDIAN SIGNATURE	DATE

**Register Today!**

Complete both sides of this application and return with payment in full by email:

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**Mail:** 1000 Lake Drive, West Hempstead, NY 11552  
**Register Online:** [www.SportimeNY.com/HempsteadLake](http://www.SportimeNY.com/HempsteadLake)  
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