



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

**SUMMER 2026**  
**Junior Tennis Program Application**

**SUMMER TENNIS PROGRAM SEASON: JUNE 29, 2026 - SEPTEMBER 4, 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?  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.

ITEM DESCRIPTION - 10 WEEKS	DURATION	MEMBER COST	NON-MEMBER COST	PER DIEM	# SESSIONS	TOTAL
<input type="checkbox"/> EXCEL Red Ball (4-7 years old)	1 Hour	\$365.00	\$425.00	\$40/\$50		
<input type="checkbox"/> EXCEL Orange Ball (7-10 years old)	1 Hour	\$420.00	\$480.00	\$50/\$60		
<input type="checkbox"/> EXCEL Green Ball	1.5 Hour	\$645.00	\$720.00	\$65/\$75		
<input type="checkbox"/> EXCEL Yellow Ball	2 Hour	\$910.00	\$1,010.00	\$95/\$105		
<b>TOTAL</b>						

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

**RED 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

**ORANGE BALL - 1 HOUR**

Tue: 4:00pm - 5:00pm

Thur: 4:00pm - 5:00pm

**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@sportimeny.com](mailto:quogue@sportimeny.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@sportimeny.com](mailto:quogue@sportimeny.com)



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**Payment Information** Please select your payment method:

<input type="checkbox"/> CREDIT CARD			
<input type="checkbox"/> I authorize SPORTIME to bill 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"/> Select to make this your guaranteed form of payment on file.			
<input type="checkbox"/> CHECK OR CASH			
You must have a credit card on file if you are not paying the full amount.		<input type="checkbox"/> CHECK <input type="checkbox"/> CASH	IF CHECK, NO. AMOUNT

**Liability Waiver, Assumption of Risk and Release and Other Terms:**

By signing below 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 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 bank account/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 the named participant 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 the named participant to be physically sound and suffering from no conditions, impairment, disease, infirmity or other illness that would prevent the named participant's participation in SPORTIME programs, services and activities. In the case of an 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 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 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>. SPORTIME DOES NOT GUARANTEE MAKE-UPS FOR CLASSES MISSED, and any make-up authorized must be completed by August 31st of the session year

**AUTHORIZED SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Register Today!**

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

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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)