SPORTIME Quogue
2571 Quogue-Riverhead Road, East Quogue, NY 11942
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www.SportimeNY.com/Quogue

BOUNCE PRESCHOOL TENNIS PROGRAM
2026-2027 Program Application

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

☐ **8-Week Fall Session:** Tue, Sept 22, 2026 - Thur, Nov 12, 2026 ☐ **8-Week Fall/Winter Session:** Thurs, Dec 3, 2026 - Thurs, Feb 4, 2027

☐ **8-Week Winter/Spring Session:** Tue, Feb 23, 2027 - Thur, April 15, 2027 ☐ **8-Week Spring Session:** Tues, April 27, 2027 - Thurs, June 17, 2027

Programs are off 11/26/26, 12/23/26-1/2/27, 2/15/27-2/20/27, 4/19/27-4/24/27

PLAYER INFORMATION Please complete all fields and print clearly. Players must be active SPORTIME Members to participate in SPORTIME programs.

PLAYER: FIRST NAME | LAST NAME | DATE OF BIRTH | GENDER ☐ FEMALE ☐ 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: ☐ PHONE ☐ EMAIL ☐ TEXT ☐ 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 No Membership Required

ITEM DESCRIPTION	DURATION	8 WEEKS	# SESSIONS	TOTAL
☐ Mini Bounce - Ages 2-3	1 Hour	$200.00		
☐ Bounce - Ages 4-5	1 Hour	$250.00		
TOTAL				
DISCOUNT: 10% sibling discount				
BALANCE DUE IN FULL				

Schedule Selection Please check box that apply.

MINI BOUNCE - 1 HOUR - Ages 2-3
☐ Tues: 10:00am - 11:00am
☐ Thurs: 10:00am - 11:00am

BOUNCE - 1 HOUR - Ages 4-5
☐ Tues: 4:00 - 5:00pm
☐ Thurs: 4:00 - 5:00pm

Payment Information Please select your payment method:

☐ CREDIT CARD

☐ I authorize SPORTIME to bill my credit card on file.

CARD NUMBER | CVV | ZIP | EXPIRATION

☐ Please use this card: ☐ MC ☐ VISA ☐ AMEX ☐ DISCOVER

☐ 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

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 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 or credits 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 also understand that membership is required for participation in certain SPORTIME programs. SPORTIME reserves the right to close courts for repair or alteration. I understand and agree that SPORTIME retains the rights to any photographs or video taken of the named participant 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. I hereby authorize SPORTIME to contact me by phone, email and/or text message, and if the named participant's email address is provided above, I authorize SPORTIME to contact the named participant at such address directly. SPORTIME DOES NOT GUARANTEE MAKE-UPS FOR CLASSES MISSED BY THE NAMED PARTICIPANT, and any make-up authorized must be completed by August 31st of the session year.

AUTHORIZED SIGNATURE: **DATE:**