



# ADULT PROGRAM REGISTRATION

Long Beach Tennis Center 899 Monroe Blvd, Long Beach, New York 11561 phone (516)432-6060



Player's Name \_\_\_\_\_ Date \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_

Email \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Emergency Contact Phone: \_\_\_\_\_

Level of Play: Beginner Adv Beginner Intermediate Advanced USTA RATING: \_\_\_\_\_

Available Days/Times: MON \_\_\_\_\_ TUES \_\_\_\_\_ WED \_\_\_\_\_

THUR \_\_\_\_\_ FRI \_\_\_\_\_ SAT \_\_\_\_\_ SUN \_\_\_\_\_

Comments:

Circle all that apply LEAGUES—FULL/HALF SHARE LESSON PKGS

LNP w/pro (name) \_\_\_\_\_ OTHER: (explain)

CIRCLE DAY AND TIME BELOW FULL SHARE: \$ \_\_\_\_\_ HALF SHARE: \$ \_\_\_\_\_

### 15 WEEK LEAGUES

#### Women's Singles (1.0; 1.5 hours)

- 2.5+ Singles Mon 11:00am-12:30pm (\$425 full) 1.5 hr
- 3.5 Singles Tues 11:00am-12:00pm (\$300) 1.0 hr
- 4.0 Singles Thur 9:30-11:00am (\$425 full, \$250 half) 1.5 hr

### 30 WEEK LEAGUES

#### Women's Leagues

- 3.0 Singles- Wednesday 7:30-9:00pm (\$950 full; \$570 half)
- 3.5 Singles- Thursday 7:30-9:00pm (\$950 full; \$570 half)
- 3.0 Doubles- Monday 7:00pm-9:00pm (\$950 full; \$570 half)
- 3.5 Doubles- Tuesday 7:00-9:00pm (\$950 full; \$570 half)
- 4.0 Doubles- Tuesday 7:00pm-9:00pm (\$950 full; \$570 half)
- 4.0 Doubles- Friday 10:00am-12:00pm (\$675 full; \$470 half)

### 15 WEEK LEAGUES

#### Women's Doubles (1.5 hours)

- 3.5- Wed 10:00am-11:30am (\$325)
- 3.0- Tues 9:30-11:00am (\$325)

### 30 WEEK LEAGUES

#### Men's Leagues

- 3.5 Doubles- Mon 7:30-9:00pm (\$800 full, \$425 half)
- 3.0 Singles- Tues 9:00-10:30pm (\$950 full; \$570 half)
- 4.0+ Singles- Wed 9:00-10:30pm (\$950 full; \$570 half)
- 4.0 Doubles- Sat. 8:00-10:00am (350 for 30 wks) PROMO

### ADULT LESSONS

- Learn & Play Contact Dory (Day/time varies) 17 weeks; \$645
- Private lessons Staff Pro \$100/HR (Dory, Naz, Kelvin)
- Senior/Master Pro \$105/HR (Sid, Fayez, Chuck)

### ADULT WORKSHOPS

- Tournament Training Workshops Sat/Sun 10-11:30am \$40pp
- Cardio Zone Tues 12-1:30pm \$28pp

# LONG BEACH TENNIS CENTER

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All players agree that the use of the facilities of the club shall be at their own risk, and they shall hold the club harmless from any liability of any kind including personal injury in connection with the use of the entire facility. All players further acknowledge and agree that there are certain dangers in playing tennis and that the undersigned in, on or about the premises of the club, or arising out of the use or intended use of the facilities, equipment or other property of the club, of the negligence of the owners, agents, or employees of the club or the negligence of any persons present on the premises of the club. These conditions apply individually and/or jointly with other players' children or guests of the players. All players agree to observe proper tennis etiquette at all times in the facility.

I understand that Long Beach Tennis Center only authorizes club credit refunds for registered services/ programs with the approval of the program director.

Signature of Applicant:	Date:
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PRINT NAME:	TOTAL AMOUNT DUE:
<b>METHOD OF PAYMENT</b>	
<b>All Payments due in full on first day of the program unless a 2 payment plan is established with credit card information provided on this application.</b>	
<i>For Office Use Only.....</i>	
<i>Method of Payment:</i> <input type="radio"/> VISA <input type="radio"/> MC <input type="radio"/> DISC <input type="radio"/> AMEX <input type="radio"/> CASH <input type="radio"/> CHECK# _____	
<i>Amount Pd:</i> _____ <i>Date:</i> _____ <i>Staff initials</i> _____	

<b>FOR INSTALLMENT PAYMENTS ONLY:</b>			
<b>I have reviewed my payment options with the director/pro in charge of the program, and have established the following payment plan:</b>			
<input type="radio"/> <b>I hereby allow my credit card to be charged in ___ installments of \$ _____ each on the first of each month</b>			
<input type="radio"/> VISA <input type="radio"/> MASTERCARD <input type="radio"/> DISCOVER <input type="radio"/> AMEX			
CC No:	Installment Pd:	Security Code:	Exp Date:
Signature of Applicant (or parent/guardian if minor under 18 years of age)		Date:	