

LONG BEACH TENNIS CENTER

899 Monroe Blvd, Long Beach NY 11561

Phone: 516-432-6060 Email: info@longbeachtenniscenter.com www.longbeachtenniscenter.com



JUNIOR PROGRAM APPLICATION

APPLICANT INFORMATION

Parent / Guardian Name:		
Childs Name:		Age:
Street:		
City:	State:	ZIP Code:
Home Phone:	Work Phone:	Cell:
Email Address:		

EMERGENCY CONTACT

Name:		Phone:
Name:		Phone:
Food Allergies: <input type="checkbox"/> Yes <input type="checkbox"/> No Please List:		
Special Needs: <input type="checkbox"/> Yes <input type="checkbox"/> No Please List:		

PROGRAMS

	Amount Due
All Payments due in full on first day of the program unless a 2 payment plan is established with credit card information provided on back of application.	
**CMBC 10 weeks, 1 hr, \$195 <input type="checkbox"/> Day(s) preference: M T W Th F Sat Sun <input type="checkbox"/> Time(s) available: _____	
**Junior Development 17 weeks, 1 hr, \$595 <input type="checkbox"/> 4:00-7:00pm <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thur (1 hr) Time(s) available: _____	
**Tournament Training 17 weeks, 2 hrs \$1295 Per diem rate.....\$100..... <input type="checkbox"/> Tues 6:00-8:00pm <input type="checkbox"/> Thur 5:00-7:00pm <input type="checkbox"/> Wed 5:30-7:30pm <input type="checkbox"/> Sat 12:00-2:00pm <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Sat	
** On court evaluation required before signup for placement	
GENERAL COMMENTS:	
Start Date:	Amount Due: \$

PRIVATE/SEMI-PRIVATE LESSONS

	Private 1HR/.5HR	Private (17 wks) 1HR/.5HR	Semi Private (17 wks) 1 HR	Amount Due:
Master Pro	\$130/65	\$2200/\$1100	\$1100 per person	
Senior Pro	\$110/55	\$1850 /\$935	\$935 per person	
Staff Pro	\$100/50	\$1700 /\$875	\$900 per person	
Start Date:	Amount Due:			\$

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Name:	Total Amount Due:
PROGRAM START DATE:	

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. Note: No refunds will be given for Tournament Training Sessions.

Signature of Applicant (or parent/guardian if minor under 18 years of age)	Date:
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METHOD OF PAYMENT

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.

For Office Use Only.....

Method of Payment: VISA MC DISC AMEX CASH CHECK# _____
Amount Pd: _____ **Date:** _____ **Staff initials** _____

FOR INSTALLMENT PAYMENTS ONLY:

I have reviewed my payment options with the director/pro in charge of the program, and have established the following payment plan:

I hereby allow my credit card to be charged in _____ installments of \$ _____ each on the first of each month

VISA MASTERCARD DISCOVER AMEX

CC No:	Installment Pd:	Security Code:	Exp Date:
Signature of Applicant (or parent/guardian if minor under 18 years of age)		Date:	