

Mail-in Registration Form 2018

Spring Tennis League 2018

FORM WILL PRINT ON 1 LETTER SIZE PAPER.

QUESTIONS: www.scjtl.org scjtl@ariastennis.com | 631/ 590-5019

SCJTL Mail-in registrations complete and mail to:
SCJTL 33 Sheppard Lane, Smithtown, NY 11787
 Mail-in registrations will be processed through the SCJTL Family Tennis Member site. *Registration confirmation will be sent by e-mail only.*

APPLICATION INSTRUCTIONS: X COMPLETED STEPS.

- | | |
|---|--|
| 1. <input type="checkbox"/> Enter Parent & Player Information | 4. <input type="checkbox"/> Enter Division Level Information |
| 2. <input type="checkbox"/> Enter Shirt Information. | 5. <input type="checkbox"/> Enter # Sessions & Price Information |
| 3. <input type="checkbox"/> Enter Registration Date Information | 6. <input type="checkbox"/> Enter Amount Enclosed Information. |
| | 7. <input type="checkbox"/> Sign form. |

(1) Player Information

Parents First Name: _____ Last Name: _____

Check here if you are an SCJTL Member: Yes: No

Address: _____

Town: _____ N.Y Zip: _____

Cell Phone:(____) _____ Home Phone:(____) _____

Email (Please print clearly): _____

Registration confirmation made by e-mail with attachments.

E-mail address will be added to SCJTL e-mail list for weekly and daily e-mail announcements. E-mail

Addresses will not be sold or given to anyone under any circumstances. Promotions announcements may be made through ATC and SCJTL only. Monthly e-mails are sent with SCJTL program and tennis event announcements throughout the year from SCJTL. You may choose to be removed from the SCJTL list by replying to sent e-mail.

Player's First Name: _____ Last Name: _____

M/F: _____ D.O.B.: ____/____/____ Current Age: _____

School: _____ Grade next Sept.: _____

Parent and emergency info:

Mother: _____ Father: _____

In case of emergency, call: Name _____

Relationship: _____ Phone: _____

(2) Shirt Information

*Shirts are child (Ch.) & adult (Ad.) sizes.
Spring Tennis League price includes 1 shirt per player enrolled.*

Ch. Med 10/12: _____

Ad.Small _____ **Ad.Medium** _____ **Ad.Large** _____ **Ad.X-Large** _____

Additional shirts are available for purchase at \$13.25 ea.

Please write number needed here _____ x \$13.25 (*NYS tax incl.)= _____

Shirts given at each site on start date. Shirt & Racquet info available at scjtl.org

Click "Spring Tennis League" then "STL Equipment"

(7) Waiver and Signature:

As parent or legal guardian of the above participant, I hereby give permission for my child to participate in this Suffolk County Junior Tennis League (SCJTL) program and agree to comply with all program regulations. In case of accident or injury and emergency contact person cannot be reached, I grant SCJTL permission to obtain medical attention for my child if necessary, for which I will be financially responsible. I hereby release SCJTL and the staff and management of SCJTL programs from any responsibility for bodily injury, property damage or theft of personal property that may occur while involved in this program on or off the SCJTL program sites. This release applies individually and jointly with other campers, friends or family members. SCJTL reserves the right to dismiss any student whose conduct is deemed by SCJTL to be detrimental to other participants, SCJTL staff, or to the SCJTL program. I further understand that SCJTL retains the right to any photographs or video taken at the program site to be used publicly or advertising. SCJTL is not responsible for lost or stolen property; I agree to label all of my child's possessions.

Parent (Guardian) signature: _____

(3) Registration Date Information

Registration may be made on a weekly basis.

2018 Spring Tennis League

White /Blue Division

Week # >>>	1	2	3	4	5
Sundays	4/29	5/6	5/20	5/27	6/3

No session Mother's Day, May 13.

(4) Division Level Information

Use the guidelines stated in each division. Any questions please call.

White: _____

(Beginners, Intermediate, Middle School. 11 - 13yrs.)

Sundays: 6:00 to 8:00 pm

(Blue): _____

(Beginners, Advanced, Jr. Varsity, Varsity 14 to 18yrs)

Sundays: 6:00 to 8:00 pm

**Limited entries per Division. Divisions may be combined depending on registration. Notice and choice provided as soon as determined.*

(5) Session Selection:

Select number of Sessions:

Tot. Reg	#wks	Select (x)
\$170	5	
160	4	
150	3	
120	2	
75	1	

Location:

All sessions played indoors at Sportime Kings Park .
275 Indian Head Rd, Kings Park, NY 11754

(6) Amount Enclosed Information:

REGISTRATION TOTAL = _____

Registrations cancelled after programs start dates with no play will incur \$25 cancellation fee.

ADDITIONAL PURCHASES:

Additional Shirts \$ _____ = **TOTAL \$** _____

(NY Sales tax included in additional purchases) *Returned checks subject to \$40 return check fee.*

REGISTRATION + ADDITIONAL PURCHASE TOTAL = _____

Check made payable to "SCJTL".