



2018-19 Indoor Season Player Pass Program

So you want to play a lot of tennis!

Choose your favorite time period (early morning or mid-day) purchase a Player Pass for the season and play as much tennis as you would like Monday through Friday.

~ **Early Bird Player Pass** (7-9am Monday through Friday) **\$899**

~ **Matinee Player Pass** (12:00-3:30pm Monday through Friday) **\$1,199**

Season Player Pass Information

- **Player Passes are applicable for open court play only during the chosen designated time period**
- **Player Passes cover open court fees of the holder only; all other players pay their portion of the normal open court fee**
- **Reservations for Player Pass courts can be made six days in advance for singles or doubles.**



Dates: Tuesday, September 4, 2018 - May 6, 2019 excluding Holiday break, 12/24/18-1/1/19 (33 weeks)

Holiday Closures: GS will be closed on Labor Day (9/3), Thanksgiving Day (11/22), Christmas Eve (12/24), Christmas Day (12/25), and New Year's Day (1/1/19). These dates are not included in our 33 week season.

For more information, please contact Oksana Mikhailova at (914) 234-9206 or omikhailova@grandslamtennisclub.com

Grand Slam – Great Tennis, Great Teaching!



Grand Slam Health & Tennis Clubs, Inc Program Registration Form

Participant's Name _____ DOB _____

Parent's Name (if a minor) _____ Email _____

Street Address _____

City _____ State _____ Zip _____ E-mail _____

Phone (H) _____ (W) _____ (C) _____

Select Program

Season Player Pass:

Early Bird Season Player Pass (Monday - Friday 7-9am) \$899

Matinee Season Player Pass (Monday - Friday 12:30-3:30pm) \$1,195

Tuition Payment

Check: ___ Cash: ___ Credit Card: ___ Card: ___ Amex ___ Visa ___ MasterCard

Card # _____ Name on Card: _____ Billing Zip Code: _____

Amount: _____ Expiration Date: _____ Security # _____ Signature: _____

Parent/Guardian Waiver

I, as the participant and or legal guardian of the participant, understand and am aware that any strenuous physical activity involves certain risks; I hereby assume the risk of any and all accidents and injuries of any kind which may be sustained by me or my child by any reason or in any connection with my or his/her participation in any club program or activity; and I hereby release and discharge Grand Slam Health & Tennis Clubs, Inc., Spectrum Sports, Inc., its partners and their shareholders, directors, officers, agents and employees from any and all actions, causes of action, damages, claims or demands which may arise against Grand Slam Health & Tennis Clubs, Inc., Spectrum Sports, Inc., and any other described parties, for all injuries known or unknown which I, or my children have or may incur by participating in these programs, except to the extent such accident or or injury is caused by or results from negligence or willful misconduct Grand Slam Health & Tennis Clubs, Inc., Spectrum Sports, Inc. and any other described parties. Waiver: I, the undersigned have read this release and understand all of its terms. I execute it voluntarily and with full knowledge of its significance.

Signature: _____ Relationship: _____ Date: _____