



**April 26, 2021 - June 20, 2021\***

High Performance is at the top of our Hitting Hot pathway. It offers a comprehensive approach to tennis development for athletes who are committed to learning to play well and achieving their personal goals in tennis; including collegiate tennis and beyond. Led by Rob Ferrante, the program has a rigorous curriculum offering many hours of comprehensive training each week. USTA tournament participation is integral to the development of high performance players and private lessons are required to complement the program.

**High Performance Components**

- On court training with tennis related fitness
- Development planning and goal setting
- Walk-On court time
- Supervised Sunday Match Play 3:00-5:00pm
- Competitive schedule planning
- Supervised Friday warm-up 3:00-4:00pm

**HP 1**

<b>Monday</b>	<b>Wednesday</b>	<b>Tuition</b>
<b>5:30-7:30pm</b>	<b>5:30-7:30pm</b>	<b>\$1,875</b>

**HP 2 & 3**

<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Tuition</b>
<b>5:30-7:30pm</b>	<b>5:30-7:30pm</b>	<b>5:30-7:30pm</b>	<b>5:30-7:30pm</b>	<b>\$1,875 / \$2,275</b>

No refunds once play commences. Please check our website for complete information about our refund policy.

\*Classes will not meet on Memorial Day.

**Private Lesson Requirement**

**5 Pack of Lessons \$625 - \$725**

For more information, contact Rob Ferrante 914.234.9206 [rferrante@grandslamtennisclub.com](mailto:rferrante@grandslamtennisclub.com)

*Grand Slam - Great Tennis, Great Teaching!*

1 Bedford-Banksville Road, Bedford, NY 10506

## Grand Slam Health & Tennis Clubs, Inc Program Registration Form

NAME \_\_\_\_\_ DOB \_\_\_\_\_ SCHOOL&GRADE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE/ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ PARENT'S NAME(S) \_\_\_\_\_

CELL PHONE \_\_\_\_\_ PARENT'S E-MAIL \_\_\_\_\_

ATHLETE'S PHONE \_\_\_\_\_ ATHLETE'S E-MAIL \_\_\_\_\_

PAYMENT METHOD \_\_\_\_\_ CHECK (ATTACHED) CREDIT CARD: \_\_\_\_\_ AMEX \_\_\_\_\_ MC \_\_\_\_\_ VISA

CARD # \_\_\_\_\_ EXP. \_\_\_\_\_ SECURITY CODE \_\_\_\_\_

CARDHOLDER NAME \_\_\_\_\_ BILLING ZIP CODE \_\_\_\_\_

HP 1: Days \_\_\_\_\_ HP 2: Days \_\_\_\_\_ HP 3: Days \_\_\_\_\_

### Payment / Refund Policies

**Deposit** - A \$1,000.00 is required to reserve a spot in the program for the upcoming indoor season. Deposit is refundable until August 1<sup>st</sup>. After August 1<sup>st</sup> the deposit is non transferable or refundable.

**Early Bird Payment** - In the event that a client takes advantage of this payment option and then decides to cancel their reservation they may do so and get a full refund of monies paid prior to August 1<sup>st</sup>. After August 1<sup>st</sup> the monies paid will be refundable (less deposit equivalent) up until September 1<sup>st</sup>. All refunds will be subject to a \$25.00 cancellation fee.

**Balance due** - In August GSB will invoice the balance due for all junior programs. Payments must be received no later than the 1<sup>st</sup> day of play.

**Refund/ Credit** - If a junior must discontinue participation once the season / session is underway; all program fees paid will be held as an in-house credit. This credit may be applied in the future towards any pro shop, court time, play program or instruction purchase for themselves or any other member of their family. Please note that a refund will only be issued if the party moves more than 50 miles from GSB or if the injury in question will prevent them from participating for the rest of the season. Documentation in both cases will be required prior to refund consideration. All refunds/credits after October 1<sup>st</sup> will be subject to a \$150 cancellation fee.

**Make-ups** - GSB does not guarantee make-up sessions or credit for sessions missed. Junior program participants may make up four missed sessions per class purchased. All junior make-up sessions must be approved, scheduled through our Tennis Program Director, and completed prior to the end of the season in which they occur.

### 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 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: \_\_\_\_\_