# JDP & QST

### **After-School Programs**

## Sep 2023 – Jun 2024

Christmas Week is not included: 12/25 – 12/31/23

Program	Session	Cost	Deposit		Installments	Day/Time (circle day/s)	
QST/Red Ball	10 Weeks	\$350 – 1 day/wk	\$250	+	\$100 x 1	Mon, Wed, Fri: 4-5 pm	
Ages 5-7 years	x 4 Sessions:	\$525 – 2 days/wk	\$250	+	\$275 x 1	Tue, Thu: 5-6 pm	
1 hour Class		\$700 – 3 days/wk	\$250	+	\$225 x 2	Sat: 3:30-4:30 pm	
	()9/11-11/18	( ) 11/20-2/3	()2/5-4	/13	( ) 4/15-6/22	2	
QST/Orange Ball	20 Weeks x 2:	\$840 – 1 day/wk	\$250	+	\$295 x 2	Mon, Wed, Fri: 4-5 pm	
Ages 8-9 years	( ) 9/11-2/3	\$1260 – 2 days/wk	\$250	+	\$337 x 3	Tue, Thu: 5-6 pm	
1 hour Class	( ) 2/5-6/22	\$1680 – 3 days/wk	\$250	+	\$358 x 4	Sat: 3:30-4:30 pm	
QST/Green Ball	20 Weeks x 2:	\$840 – 1 day/wk	\$250	+	\$295 x 2	Mon, Wed, Fri: 4-5 pm	
Ages 9-10 years	( ) 9/11-2/3	\$1260 – 2 days/wk	\$250	+	\$337 x 3	Tue, Thu: 5-6 pm	
1 hour Class	() 2/5-6/22	\$1680 – 3 days/wk	\$250	+	\$358 x 4	Sat: 3:30-4:30 pm	
JDP/Green Ball	20 Weeks x 2:	\$1700 – 1 day/wk	\$250	+	\$363 x 4	Mon, Tue, Wed, Thu	
Ages 10+ years	( ) 9/11-2/3	\$2550 – 2 days/wk	\$250	+	\$575 x 4	and Fri: 5-6:30 pm	
1.5 hour Class	( ) 2/5-6/22	\$3400 – 3 days/wk	\$250	+	\$788 x 4	Sat: 3:00-4:30 pm	
JDP/Yellow Ball	41 Weeks	\$3485 – 1 day/wk	\$349	+	\$448 x 7	Mon, Tue, Wed, Thu	
Ages 12+ years	School Year:	\$5228 – 2 days/wk	\$524	+	\$672 x 7	and Fri: 5-6:30 pm	
1.5 hour Class	9/4-6/22	\$6970 – 3 days/wk	\$698	+	\$896 x 7	Sat: 3:00-4:30 pm	
Director / Randy Mani		ot valid without Director's signat	ture of approva		tart Date:	Wk#:	
SEE REVERSE SIDE FOR CONTRACT POLICIES AND PROCEDURES							
Player Name: Member: ( ) Yes ( ) No							
Phone: ( ) home ( ) cell ( ) Mom ( ) Dad Birthday:						irthday:	
Parent Email (required):							
Payment Details: (a) Total Contract Fees: \$ (b) Deposit Paid: \$ (c) Balance Due: \$							
(e) Installment Amount: \$ (f) How many Installments: (g) Change Fee: \$50/change.							
Payment Option: (select only one)  ( ) Installments - Monthly Autopay Plan, via credit card on file. This plan incurs a \$3 processing fee per installment.							
( ) Full Payment by Credit Card #: Exp Date: CVV#:							
( ) Full Payment by enclosed Check #, dated:							

 $My\ signature\ indicates\ that\ I\ have\ read,\ understand\ and\ accept\ the\ policies\ and\ terms\ of\ enrollment\ on\ the\ back\ of\ this\ form.$ 

Parent/Guardian Signature: \_\_\_\_\_\_\_Date: \_\_\_\_\_\_



#### CONTRACT POLICIES & TERMS OF ENROLLMENT:

- Your Registration herein initiates a Contract between you and the club throughout the entire 41-week, 20-week or 10-week season as applicable, and the Participant or the Parent/Guardian remains liable for the Total Contract Fee amount, inclusive of any remaining installments, until paid in full.
- We expect your full attendance, commitment and participation in the Program you are enrolling in.
- If a member, your club membership is continuous and will not terminate automatically at the conclusion of the seasonal activity you have registered for herein.
- Standard court etiquette and sport specific dress code (tennis whites for all junior tennis programs) must be complied with at all times.
- Please refer to Hardscrabble Club's current Program Calendar for all seasonal start and end dates, blackout dates, holiday camps, etc.
- This Registration is accepted as completed and finalized only when also countersigned by the Director of the specific Program.

#### **PAYMENT POLICIES:**

- The specified Non-refundable Deposit is due with this completed Registration Form, and will be drafted upon receipt of your form or other written authorization.
- The Balance Due can be paid in full upfront, or extended onto the 'Installment Plan' option: equal monthly installments from the first month of participation.
- Installments incur a \$3 per time processing fee. The 'Installment Option' is the default applied, unless you have paid in full upfront.
- You agree that we will not seek repeated authorizations for monthly Autopay Plans you have agreed herein to the full amount due being charged in installments.
- Your Autopay Installment(s) + monthly Membership Dues + any other charges you accrued during the preceding month, are all collected on the 2nd of each month (Automated Monthly Billing) via the credit card account you maintain on file.
- You may pre-empt the AMD debit described above by making an advance payment on or before the 25th of the preceding month. You may pay by check or credit card at the Front Desk or by mail please advise us that it is an advance Payment on Account.
- In the first month of any program, there will be no prorating for a late start you are expected to catch up on missed days instead.
- A \$20 'Decline Fee' will be assessed if your credit card declines at the time of the club's Automated Monthly Billing. Keeping your credit card on file updated at all times is your responsibility.

#### **MAKE-UPS POLICIES:**

- (a) Make-ups for missed Program days are NOT guaranteed however, Hardscrabble Club does try to accommodate make-ups to the best of its ability. Program Make-ups must be scheduled in advance with the Director, and must be completed before the end of the season in no event will make-ups be carried over into a following semester nor will any refunds or credits be issued.
- (b) When program sessions or private lessons are missed or cancelled due to events that are beyond Hardscrabble Club's control, such as inclement weather, local or national crisis or emergency, religious holidays, power outages, etc., there will be NO make-ups, refunds or house-credits provided.

**TRANSFER or CHANGES POLICY:** Program types and days are not freely interchangeable. The Transfer or Change Fee is \$50 per authorized Transfer or Change Order. Requests for changes in enrollment/scheduling must be in writing. Hardscrabble Club will try to accommodate such transfer requests to the best of its ability, but does not guarantee it - groups must be age and level appropriate, and space must be available.

MEDICAL CREDIT POLICY: When withdrawal is necessary due to an injury or medical condition, it is the responsibility of the participant or parent/guardian to bring this fact to Hardscrabble Club's attention IN WRITING. In such cases Hardscrabble Club will issue a 'house medical credit' which is calculated as being the unused portion of the total Contract/Package Fees when prorated starting from the day that the written notice of injury or cancellation AND the doctor's note specific to the injury or condition are received by Hardscrabble Club's Accounts Dept. Medical credits must be used up with 180 days from the date of issue.

#### **REGISTRATION CANCELLATION POLICIES:**

- Your Notice of Cancellation must be received by the club, IN WRITING via fax, e-mail or U.S. Postal Service. We regret that we cannot honor verbal or telephonic messages in this regard. This requirement applies to ALL cancellations whether for a program enrollment, contract weekly lesson package, club membership or medical credit
- You may cancel this registration IN WRITING within 3 days of your registration date at no cost to you.
- After the 3 days, if you break this contract due to early withdrawal or other reason and fail to complete your Installment Plan, your account will fall into 'Collections' status and the club will follow up accordingly.
- You agree that you remain liable for any uncollected balance due until paid in full in the event your bank account or credit card is declined for any reason.

**WAIVER:** I have read and do accept the policies listed above and herein. I also understand and acknowledge the risks of injury that are inherent in any program involving physical activity and/or transportation, and as the participant or parent/guardian of the child named herein, I hereby waive and release any and all rights and claims for damages I may have against Hardscrabble Club Corp., Randy Mani Tennis Academy (RMTA), the program director/s, instructors, employees, owners and/or any other sponsors and their respective representatives for any damage to or loss of my property and for any and all injuries sustained by myself or my child/ward in connection with any participation in the club's/academy's programs or other activities.

**CONSENT:** I do hereby give my consent to medical care, emergency or otherwise, including any necessary transportation, in the event of injury to or any other illness with my child/ward or myself. I also consent to photographs/videos taken at the program that may include my child/ward being used for advertising and other media efforts.

Parent/Guardian Signature:	Date:
raient/Quartian Signature.	Date.