

Player Registration

Smith  Stearns

TENNIS ACADEMY

AT THE SEA PINES RESORT

Player Registration

General Information

How did you hear about the Smith Stearns Tennis Academy?

Newspaper Magazine Website Brochure Friend Other

If other, please specify _____

In which program will you be enrolling?

Monthly Weekly Daily AM session PM session

What specific dates will you train?

_____/_____/_____ to ____/____/____

Would you like to request private lessons? Yes No

If yes, how many hours a week do you anticipate? _____

Do you have a preference of coach? _____

Boarding Information

Will you be staying at Smith Stearns Student Housing? Yes No

If no, where will you be staying? _____

Roommate Request: _____

Transportation

I will be arriving by car plane

Arrival Date/Time: _____ Departure Date/Time: _____

Arrival Location: _____ Time: _____ Airline: _____ Flight #: _____

Departure Location: _____ Time: _____ Airline: _____ Flight #: _____

I will need shuttle service to and from the airport yes no

Travelling as an unaccompanied minor? yes no

Please submit your travel information as soon as possible but no later than one week prior to arrival.

Player Registration

General Information

Player 1 Information / Rankings

Student Name: _____

Date of Birth: _____ / _____ / _____ Gender: _____

School: _____ Singles Rank: _____ Doubles Rank: _____

State: _____ Sectional: _____ National: _____ ITF: _____

Goals: *Please give us a brief explanation of what you expect to achieve during your stay.*

Player 2 Information / Rankings

Student Name: _____

Date of Birth: _____ / _____ / _____ Gender: _____

School: _____ Singles Rank: _____ Doubles Rank: _____

State: _____ Sectional: _____ National: _____ ITF: _____

Goals: *Please give us a brief explanation of what you expect to achieve during your stay.*

Parent/Guardian Information

Father's Name: _____

Mother's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Father's Cell Phone: _____ Mother's Cell Phone: _____

Parent Email: _____

Emergency Contact Information

Alternative Person to Contact in an Emergency: (Other than listed above)

Name: _____

Relationship: _____ Contact Phone: _____

Player Registration

Terms and Policies

Payment

All payments must be made out to Smith Stearns Tennis Academy. Regardless of payment method we require a credit card to be held on file.

Please select a payment method:

Visa Mastercard American Express Discover Personal Check

Credit Card # : _____ Expiration Date: _____

Name on Card: _____ Signature of Card Holder: _____

Terms and Conditions

- A 50% deposit is required upon reservation.
- Remainder of balance will be due upon arrival.
- Private lessons are to be paid in full upon scheduling. No refunds will be issued for cancellations.
- The credit card number on file will be charged for any unpaid balances, damages to SSTA property, extension fees, lesson charges, or any other expenses incurred during the students stay.

Cancellation Policy

- All cancellations must be submitted in writing to the Office Administrator.
- Refunds at least 7 days prior to arrival will be given less a 20% service charge.
- No refunds will be given if cancellation is within 7 days of arrival.
- Credits are encouraged and will be given in the full amount paid to be put towards a future reservation. The credit will be held for 12 months from the date of cancellation.
- Cancellations due to medical issues will be handled on an individual basis.

Player Registration

Terms and Policies

Release of Liability: The players and their parents release Smith Stearns Tennis Academy/The Sea Pines Resort, its agents, owners, and employees from any claims for accidents, lost or stolen articles, money, or valuables that may occur during the players stay with Smith Stearns Tennis Academy and at tournaments or other locations during the players stay.

Permission to Transport: The players and their parents release Smith Stearns, its agents, owners and employees from any and all injury, loss, accident or death that may occur to the player during their stay and during travel to and from tournaments or activities, or at any other locations, programs, or activities associated with Smith Stearns Tennis Academy.

Image Release: The players and parents consent to all videotaping and photographing of the player while participating in Smith Stearns Tennis Academy activities and/or on Smith Stearns Tennis Academy and/or Sea Pines Property. I agree that Smith Stearns Tennis Academy and/or The Sea Pines Resort can use images without prior approval.

Off Campus Activities: My child has permission to participate in all campus/off campus sponsored activities.
 yes no

Acceptance and Acknowledgement: The undersigned certifies to be the parent or guardian of the below named student and both parent and player agree and understand all terms and policies above as attested by the following signatures.

Parent/Guardian Signature

Player Signature

Date

Date

Player Registration

Consent for Treatment

Consent For Medical Treatment & Care

Smith Stearns Tennis Academy

This is to certify that the administrative staff of the SMITH STEARNS TENNIS ACADEMY is being given authority by me, _____, parent of _____

(Name of Parent or Guardian)

(Name of Child)

to act on my behalf for any medical care, treatment (including immunizations), and prescriptions reasonably necessary or medically advisable to maintain life, health, and well-being of my child. I (We), the parent(s)/ guardian, understand that in the event of an accident, illness or medical emergency, I authorize Smith Stearns agents, owners, or employees to act on my behalf for any medical, mental health or surgical treatment. This includes, but is not limited to, first aid, prevention and care of injuries, follow-up care, and the taking of over-the-counter medications, prescription drugs, x-rays, examinations, emergency surgery, etc., deemed necessary by a licensed physician. This consent for treatment extends to the signing and completion of; (1) legal authorization for treatment; (2) consultations; (3) emergency examinations; (4) consent for hospitalization; (5) anesthesia; (6) dental care; and (7) treatment or surgery that may be deemed necessary by appropriate medical personnel. I also certify the player has proper medical insurance and understand that Smith Stearns Tennis Academy is not responsible for medical expenses that may occur during his/her stay.

Signed: _____

Print Name: _____

Students Name: _____

Relationship to Student: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent Email: _____

Phone: _____ Date: _____ / _____ / _____

Player Registration

Medical Information & Insurance

*Note: In most instances, medical fees will be charged to your credit card.

Insurance Company: _____ Group or Policy #: _____

Name of Insured: _____ Relationship to Participant: _____

Insurance Company Address: _____

Personal Medical Information

Please list below any medications that your child is currently prescribed/taking that we should be aware of.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

If child is currently on medication, please list details on the back of this form.

Credit Card Information

I hereby authorize the use of my credit card without prior approval to cover medical expenses.

Card #: _____

Exp. Date: _____ Card Type _____

Name on the card:

X _____

Please Sign here

Please list below any specific medical information (i.e. allergic reaction to certain drugs, medications, allergies, or any other health concerns/issues) that SSTA or a physician should be aware of when treating your child.

Please list below any operations or injuries:

Player Registration

Training Release & Waiver

Release and Waiver of Liability for Dependent Child

Smith Stearns Tennis & Fitness Program

It is expressly agreed that participation in the fitness training activities by the Smith Stearns Tennis Academy shall be undertaken by these minor members at their own risk, and the Seller/Provider shall not be liable for any injuries, loss or damage to any member or guest; or the property of any member or guest or be subject to any claim, demand, injuries, damages, actions or causes of actions. It is especially agreed that the Seller/Provider shall not be responsible or liable to members or their guests for articles lost or stolen in the club. The Seller/Provider also shall not be responsible or liable for any loss or damage to any other property or members or their guests, including their automobiles and contents. It is also agreed that any damages to the club facilities or to the property of any member by another member or his guest, is the sole responsibility of the Smith Stearns Tennis Academy. The Smith Stearns Tennis Academy accepts all responsibility for the programs and activities designed as tennis-fitness conditioning, and that the dependent minors involved will be supervised by the representatives of Smith Stearns during their use of Sea Pines Racquet Club and Breakthrough Fitness facilities. I attest that I have the authority to sign this waiver as custodial guardian for the minor child named on the membership.

Signed: _____

Print Name: _____

Students Name: _____

Relationship to Student: _____

Phone: _____ Date: ____/____/____

Player Registration

Training Release & Waiver

Smith Stearns Tennis Academy

Junior Waiver

I, _____, a minor (Minor) and I _____
(Print Name of Minor Child) (Print Name of Parent or Legal Guardian)

the parents or legal guardians of Minor, all of whom are referred to as "I", desire to enroll Minor in a sports program or use the facilities and services at SMITH STEARNS TENNIS ACADEMY/SEA PINES RESORT ("Academy"). In exchange for the opportunity to participate in the sport program and other physical fitness, educational, and social activities and/or to use Academies facilities and services, **I agree not to sue or bring legal action against Smith Stearns Tennis Academy/Sea Pines Resort and their affiliated companies, employees, instructors or their successors and assigns for all loss, damage or injury (including death) that I (or our family) may experience in connection with my activities or attendance at Academy, even if caused by a third party, other students or Smith Stearns Tennis Academy.**

I understand that Minor's use of facilities and services, participation in a sport program, and/or related activities, involves dangerous conditions and risks of bodily injury (broken bones, for example) and risks to property (stolen or damaged equipment, for example). I also understand that certain sport and social activities can involve travel away from the academy and that all travel involves certain risks (accidents, for example). **I assume full responsibility for these conditions and assume the risks no matter how the conditions and risks arise**, including the acts and omissions and/or negligence of outside third parties, other students, or SMITH STEARNS TENNIS ACADEMY and its affiliated companies, employees or instructors. **I waive notice from SMITH STEARNS TENNIS ACADEMY/SEA PINES RESORT that specifically outlines these dangerous conditions and risks.**

I agree to be personally responsible for, and hold SMITH STEARNS TENNIS ACADEMY/SEA PINES RESORT harmless from, all costs (including amounts recovered from SMITH STEARNS TENNIS ACADEMY/SEA PINES RESORT) related to any legal action brought against SMITH STEARNS TENNIS ACADEMY/SEA PINES RESORT, its employees, instructors, staff or their successors and assigns for loss, damage or injury (including death) to any person, entity or property caused by Minor, in any way, while at Academy or while traveling.

If a dispute arises under this agreement that cannot first be resolved through good faith negotiation, the dispute will be submitted to arbitration and resolved by a single arbitrator (who will be a lawyer) in accordance with the Commercial Arbitration Rules of the American Arbitration Association then in effect modified by this paragraph. All such arbitration will be confidential and take place at the office of the American Arbitration Association located nearest to Hilton Head Island, South Carolina. The decision rendered by the arbitrator will be in writing, final, binding and conclusive, and judgment may be entered upon such decision by any court. The arbitrator has no authority to award attorneys fees.

I have carefully read this agreement and understand each provision. I also understand that this waiver is binding upon Minor and Minor's family members, heirs, and representatives.

I, freely signed this agreement on _____, 20____. Date Signed

Signature of Parent

Signature of Participant

Print Name

Print Name

Player Registration

Additional Information

Transportation to SSTA

By Car

To SSTA at the Sea Pines Resort

From Hwy 278

Drive over Cross Island Parkway bridge

Pay \$1.25 toll and proceed straight toward the Sea Pines Circle

Turn Right on Greenwood Drive -Sea Pines Plantation Main Gate, travel on Greenwood Drive for approximately 1½ miles. Turn Right onto Plantation Drive (travel approximately 1 mile)

Turn Right on Lighthouse Road

Turn Left on Lighthouse Lane

Turn Left into the first parking lot (The Inn at Harbour Town sign)

The Smith Stearns office is located near the Sun Deck Café by the Harbour Town pool

Court #1 & #2 is where most private lessons are held and courts #5-17 is where the Daily Academy is held.

To Smith Stearns Student Housing

From Smith Stearns Tennis Academy

Leaving Harbour Town, turn Right onto Lighthouse Road

Turn Left onto Plantation Drive

Turn Left onto Greenwood Drive and exit Sea Pines Plantation to Sea Pines Circle

Exit circle ¾ way around onto Palmetto Bay Road

Drive over Cross Island Parkway bridge

Pay \$1.25 toll and exit immediately to the right -Marshland Road exit.

Turn Right at stop sign onto Marshland Road (Follow for about 1 mile)

Turn Right onto Namon Road

Turn Right onto West Morgan Court

Smith Stearns Student Housing is at 12 & 14 West Morgan Court

By Air

Free shuttle service is provided for our boarding students from Hilton Head Airport (Code: HHH). Shuttle service from Savannah International Airport (Code: SAV) is available for a fee of \$90 per way.

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Additional Information

Suggested Items to Bring

Rule of thumb

Pack as you would to stay in a hotel. Although your child will be here for a while, be sure not to *overpack*. Space is available for each child and we encourage them to be mindful that others will want ample room for their belongings as well.

What to Bring PLEASE LABEL EVERYTHING!

“Under the bed” storage container

Toiletries

Sunscreen

Water Jug

Tennis Attire (t-shirts ok)

Tennis Shoes

Tennis Equipment

Casual Clothes

Bug Spray

Beach Towel

Swimsuit

Spending Money for Incidentals

\$25.00 - \$50.00 maximum per week. We would recommend *not* sending cash. What works best are the prepaid DEBIT VISA-type cards available at most grocery stores. They can purchase merchandise and most are reloadable.

What Not to Bring

Bath Towels

Linens

Pillows, unless you have a preferred one

Snacks (Available in housing)

Drinks (Available in housing)

Jewelry or other valuables

Optional

Laptop computer - Wireless internet is available, however, we are not responsible for any damages which may occur.

Laundry

Assistance will be provided as well as detergents/soaps.

Pro Shop

The Sea Pines Racquet Club pro shop is located on-site. They provide racquet stringing and have various tennis items available for purchase.

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Additional Information

Additional Activities

Supervised activities will be available for our boarding students and may include trips to the beach, movies, mall, and other “fun” activities. These activities will be an additional cost to the student and must be paid for using their own spending money.

Mail

If you would like to send your child mail or packages please use the following addresses:

Mail

P.O. Box 7833
Hilton Head Island, SC. 29938

Packages

1 Lighthouse Lane
Hilton Head Island, SC. 29928

Fax

Students can receive faxes at the following number: (843) 363-4179

To Complete Registration

Please mail, fax, or email us your registration form. Your application will be processed and a confirmation will be emailed to you upon receipt.