

Player Registration

Full Time Enrollment



Registration For Full-Time Enrollment

General Information

In which program will you be enrolling?

- Year Round ALL Day Semester ALL Day
 Year Round PM Only Semester PM Only
 Boarding Non-Boarding

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: _____

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

I will need shuttle service 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. Transportation to/from the Hilton Head Airport (HHI) is free of charge, however, there is a \$75 fee each way for transportation to/from the Savannah Airport (SAV).

Player Information / Rankings

Student Name: _____

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

Previous 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

Education: The school you will attend while at the academy

Year in School: _____

Parent/Guardian Information

Father's Name: _____

Mother's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Player's Cell Phone: _____

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

Parent Email: _____

Player's Email: _____

I would like to be included in the student directory Yes No

Emergency Contact Information

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

Name: _____

Relationship: _____ Contact Phone: _____

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 method of payment:

Visa Mastercard Discover American Express Personal Check

Credit Card # _____ Expiration Date: _____

Security Code: _____ Billing Zip Code: _____

Exact Name on Card: _____

Signature of Card Holder: _____

Terms and Conditions

- A \$5,000 deposit for day students and \$15,000 deposit for housing students is required at the time the application is reviewed. This deposit is non-refundable.
- Remainder of tuition balance will be paid upon selection of payment plans set forth in tuition agreement.
- A mandatory apparel package fee is required for all full-time students.
- 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, tournament coaching fees, or any other expenses incurred during the students stay.
- Accounts overdue for more than 30 days may be subject to a service charge of 10% per month.
- SSTA accounts for various student absences for tournaments and minor injuries and will not refund or credit any tuition. If a student is injured for a continuous period of over 30 days the situation will be handled on an individual basis. However, no monetary refunds will be given.

Cancellation Policy: We ask that you respect the time and effort given by our coaches by abiding to a 48 hour cancellation policy for lessons. You will be charged the full amount for lessons not cancelled within the specific time frame, unless the cancellation is due to an unexpected illness or injury. Please contact our Office Administrator in the event you need to cancel a lesson.

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 _____

Consent For Treatment

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.

This includes, but is not limited to, first aid, prevention and care of injuries, follow-up care, and the taking of over-the-counter prescriptions that are approved by a physician even when the child is not seen by a 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; (7) treatment or surgery that may be deemed necessary by appropriate medical personnel.

Date: _____ Parent's Signature: _____

(Required)

Child's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Numbers *(Include Country Code and City Code if Outside the US)*

Home: _____ Work: _____ Fax: _____

I wish for my child to participate in the Event and, in consideration of the child's participation in the Event, have read and agree to the following:

Rules of Participation: My child is in good health and has no physical or medical condition which, to my knowledge, would endanger my child or others if allowed to participate in the Event, or would interfere with the ability to participate in the Event. Notwithstanding the above, I understand that Smith Stearns' representatives, agents or employees may, at their discretion, bar my child from participation in the Event for any reason. I understand that all children must be supervised and agree that Smith Stearns, in my absence, will provide supervision during my child's participation.

Assumption of Risk: I understand and appreciate that participating in the Event can be risky and that risks cannot be eliminated regardless of the care taken to avoid injuries. I understand that the known risks of the Event include, but are not limited to, (1) bruises, sprains, scrapes, and cuts; (2) major injuries such as broken bones, joint injuries, and head, neck, and back injuries; and (3) catastrophic injuries including permanent injury or death. On behalf of myself and my child, I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of those persons released from liability below, and assume full responsibility for my child's participation.

Waiver of Liability: If my child is injured, or property is damaged or lost while my child is participating in the Event, I, on my behalf, on behalf of my child, and on behalf of my and their heirs or personal representatives, release, waive and discharge Smith Stearns, its representatives, employees and agents from, and agree not to sue Smith Stearns, its representatives, employees and agents for, claims for injury or damage that directly or indirectly result from participation in the Event, including claims which arise from the negligence of Smith Stearns, its representatives, employees and agents.

Indemnification and Hold Harmless Agreement: I agree to indemnify and hold harmless Smith Stearns and any of its owners, officers, directors, parent companies, subsidiaries, affiliates, agents, servants, members, managers, employees, sureties, successors and assigns, and all other related persons, firms, corporations, and associations or partnerships, whether herein named or referred to (collectively, the "Smith Stearns Parties"), from and against any and all claims, liabilities, actions, suits, proceedings, demands, injuries to person or property, losses, damages, expenses, claims and costs, including reasonable attorneys' fees and court costs, arising, indirectly or directly from my child's participation in the Event, including injury or damage caused

by my child. Further, the Undersigned on behalf of himself, herself or for a minor promises not to sue any of the Smith Stearns Parties for any cause of action whatsoever, even for claims arising from the negligence of one or more of the Smith Stearns Parties. I further agree to reimburse Smith Stearns for any such expenses incurred.

I agree, for myself and my child, that the statements in this agreement are contractually binding, and are not mere recitals, and that should I or my child, or my or their heirs or personal representatives, assert a claim in contravention of this agreement, I, my child, or my or their heirs or personal representatives, shall be liable for the expenses (including legal fees) incurred by the other party or parties, unless the other party or parties are finally adjudged fully liable on such claim. This agreement may not be modified orally, and a waiver of any provision shall not be construed as a modification of any other provision herein or as a consent to any subsequent waiver or modification.

I agree that any legal disputes regarding this agreement will be determined under the laws of the State of South Carolina and hereby consent to the jurisdiction of the courts of South Carolina in connection with this waiver. If any portion of this waiver is held to be invalid, the remaining portions will continue in full legal force and effect.

I hereby consent to and permit emergency treatment in the event of injury or illness to my child while participating in this Event.

I, as parent or guardian of the below named minor, hereby give my permission for my child to participate in the Event and further agree, individually and on behalf of my child, to the terms above.

Child/Participant's Printed Name: _____

Parent or Guardian's Printed Name: _____

Parent or Guardian's Signature: _____

Date: _____

Student Permission to Drive and Transport

Permission to Drive Smith Stearns Students

My son/daughter has my permission to transport other students of Smith Stearns Tennis Academy in his/her vehicle. This includes transporting to and from lessons, clinic, school, and approved social occasions.

Student Name: _____

Parent Signature: _____ Date: _____

Permission to Ride with Smith Stearns Students

My son/daughter has my permission to ride with other Smith Stearns Tennis Academy student drivers. This includes riding to and from lessons, clinic, fitness, school, and approved social occasions.

Student Name: _____

Parent Signature: _____ Date: _____

Release of Liability

By signing above, the students and parents release Smith Stearns Tennis Academy from any and all injury, loss, accident or death that may occur to the player during travel, or at any other locations, programs or activities the student attends.

With permission granted to transport and/or drive the student accepts full responsibility to communicate who they are driving with, where they are going, and time frames with Smith Stearns personnel who are responsible for your son/daughter during his/her stay. This requirement is for your child's safety. Failure to communicate will result in loss of privilege.

Student Name: _____

Parent Signature: _____ Date: _____

Additional Information

Transportation to Smith Stearns Tennis Academy

By Car:

To SSTA at the Sea Pines Resort

- From Hwy 278
- Drive over Cross Island Parkway bridge 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 Sea Pines 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 $\frac{3}{4}$ way around onto Palmetto Bay Road
- Drive over Cross Island Parkway bridge
- 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 either East or West Morgan Court
- Smith Stearns Student Housing is located 12 & 14 West Morgan Court & 56 and 62 East 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 is available for a fee of \$75 per way (Code: SAV).

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:

Toiletries
Sunscreen
Water Jug
Tennis Attire (t-shirts ok)
Tennis Shoes
Tennis Equipment
Casual Clothes
Bug Spray
Beach Towel
Swimsuit

Spending Money for Incidentals: We would recommend not sending cash. What works best is the prepaid DEBIT VISA-type cards available at most grocery stores. They can purchase merchandise and most are reloadable.

What NOT to Bring

Jewelry or other valuables

Optional Items

Bath Towels (Provided)
Linens (Provided)
Pillows (Provided)
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.

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 will be additional costs 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:

For Mail

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

For Packages

(Fed-Ex and UPS deliveries only)

Smith Stearns Business Office

1 Lighthouse Lane
Hilton Head Island, SC, 29928

Student Housing

12 East Morgan Court
Hilton Head Island, SC, 29926

56 East Morgan Court
Hilton Head Island, SC, 29926

14 West Morgan Court
Hilton Head Island, SC, 29926

62 West Morgan Court
Hilton Head Island, SC, 29926

Fax:

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