Player Registration Guest Form



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|-----|--------|------|-----|------------|--|
| Keg | istrai | tion | For | Guests | |
| 0- | | | | | |

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 | ng? | | | |
| □ Monthly □ Weekly □ Daily | □ AM s | ession \Box P | M session | |
| What specific dates will you train? | | | | |
| / to _ | / | / | | |
| Would you like to request private les | sons? 🗆 Ye | es □ No | | |
| If yes, how many hours a week do ye | If yes, how many hours a week do you anticipate? | | | |
| Do you have a preference of coach? | | | | |
| Boarding Information | Roarding Information | | | |
| Will you be staying at Smith Stearns | Student Hou | ısing? □Yes [| ∃ No | |
| If no, where will you be staying? | | • | | |
| Roommate Request: | | | | |
| | | | | |
| Transportation | | | | |
| I will be arriving by □ car □ plane | | | | |
| Arrival Date/Time: | - | | | |
| Arrival Location: | | | • | |
| Departure Location: Time: Airline: Flight #: | | | | |
| I will need shuttle service to and from the airport $\ \square$ Yes $\ \square$ 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 1 Information / Rankings

| Student Name: | | | |
|----------------------|-----------------------|--------------------------------|---------------------|
| Date of Birth: | /// | Gender: | |
| Previous School: | | Singles Rank: _ | Doubles Rank: |
| State: | Sectional: | National: | ITF: |
| Goals: Please give ι | ıs a brief explanatio | n of what you expect to achiev | ve during your stay |

Player 2 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 wh | at you expect to achieve d | uring your stay |

Parent/Guardian Information

| Father's Name: | | |
|------------------------------------|------------------------------|--|
| | | |
| | | |
| | 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

Terms and Policies

Payment

Payment may be made in the form of credit card, check, or money order made out to Smith Stearns Tennis Academy. Please note however, regardless of payment type, we require a credit card to be held on file for all student athletes*.

Please select a method of payment:

| Check (please submit with form) | | | Money Order (please submit with form) | |
|---------------------------------|--------------------------|------------|---------------------------------------|--|
| Crec | lit Card (please fill ou | t below) | | |
| □Visa | \Box Mastercard | □ Discover | 🗆 American Express | |
| Credit Ca | rd # | | _ Expiration Date: | |
| Security Code: | | | Billing Zip Code: | |
| Exact Name on Card: | | | | |
| Signature of Card Holder: | | | | |

*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.

Terms and Conditions

- All Academy and Housing costs are due when submitting the Guest Registration Form in its entirety.
- Private lessons are to be paid in full upon scheduling. No refunds will be issued for cancellations.

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 andpolicies above as attested by the following signatures.

Parent/Guardian Signature

Player Signature

Consent For Treatment

| This is to certify that the administrativ given authority by me, | | |
|--|-----------------------------|---------------------|
| | rent or Guardian) | |
| to act on my behalf for any medical ca | ire, treatment (including i | immunizations), and |
| prescriptions reasonably necessary or | - | - |
| of my child. This includes, but is not li | | - |
| up care, and the taking of over-the-cou | | |
| when the child is not seen by a physic | | ••• |
| and completion of: (1) legal authorizat | | |
| examinations; (4) consent for hospital surgery that may be deemed necessar | | |
| surgery that may be deemed necessar | y by appropriate medica | personnei. |
| Date: Parent's Sig | nature: | |
| | | (Required) |
| Child's Name: | | |
| Address: | | |
| City: | State: | Zip: |
| | | |
| Telephone #'s (Include Country Code a | nd City Code if Outside th | he US) |
| Home: Work: | | Fax: |
| | | |

| Personal Medical Information | | Credit Card Information | |
|--|---|--|--|
| Please list below any medications that your child is currently prescribed/taking that we should be aware of. | | I hereby authorize the use of my credit card without prior approval to cover medical expenses. | |
| 1 | 4 | Card Number: | |
| 2 | 5 | Expiration Date: Type of Card: | |
| 3 | б | Name on Card: | |
| If child is currently on medication, please list details on the back of this form. | | <u>X</u> (Signature) | |

Insurance Information*

*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: _____

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: ______

Waiver of Liability and Release

Smith Stearns Tennis Academy ("Smith Stearns" or "Academy"), located at The Sea Pines Resort on Hilton Head Island, South Carolina, is a junior tennis academy providing a high level of tennis instruction in an elite setting for interested students. Smith Stearns may provide transportation and/or housing for Smith Stearns' students as well, and this Waiver of Liability and Release ("Waiver") applies to all activities applicable to Smith Stearns' students including, but not limited to, tennis instruction, tennis tournaments, practices, games, competitions, transportation, housing and/or other related events (the "Event").

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 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: _____

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 1¹/₂ 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 ¾ 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

56 East Morgan Court Hilton Head Island, SC, 29926

Student Housing

12 East Morgan Court Hilton Head Island, SC, 29926 62 West Morgan Court Hilton Head Island, SC, 29926

14 West Morgan Court Hilton Head Island, SC, 29926

Fax:

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