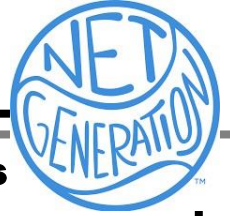


SMITH-PERRY TENNIS ACADEMY

“Train with the Best”



For Beginner to Intermediate Players 6-18 yrs!

- **SPTA Players have won 68 High School Singles and Doubles State Titles!**
- **Over 100 Universities and Colleges represented by SPTA Players!**
- **SPTA has produced Over 50 #1 Ranked Southwest Players!**

- A Fun and Productive training program for Beginners to National Tournament players!
- Premier Junior Development Program Producing the Top players in the Southwest!
- SPTA Highlights:



- [USTA Net Generation Program Integration](#)
- Footwork and Conditioning
- Includes Sports Psychology Concepts
- Offers Year-Round Programs
- Customized Training Programs Available



Ronnie Smith (USPTA) - Academy Director

John Perry (USPTA) – Director & Mental Toughness Coach

André Gavino (USPTA) – Assistant Director

Quality Instruction!... Proven format that gets results!...

Be part of the most exciting and dynamic program around!!

DATES: Next session begins Monday, August 5th.

TIME: Intermediate: Monday, Wednesday and Fri **4:30-6:30** pm.

High Performance Advanced Academy also available (Must Qualify. Please Call For Details)

Tuition: \$295/month -- Monthly program includes a 1 Hour Private Lesson

**10% Discount For Additional Immediate Family Members for Full Month Tuition Only - Call For Details

Note: All applicants must fill out credit card information for monthly Auto Pay



**All
Levels
Ages 6-18**

**Tucson's
Premier
Program!**

Call (520) 609-4683 for more information. For inclement weather, call 955-8778 for updates.

2024 Smith-Perry Tennis Academy - Net Generation Application – Fall 2024

Name _____ Address _____
Zip _____ Cell (Parent): _____ (Parent:) _____ (Player) _____
Email (Parent) _____ (Player) _____
Age _____ Birth Date ____/____/____ School _____ Male / Female



- Fun program designed for Beginners to Nationally Ranked Tournament players.
- Proven format that consistently gets the Maximum results.
- **Integrating the New USTA Net Generation System**
- Outstanding coaching staff with an unequalled track record producing the Top Players.

“Train With The Best” and reach your potential!

• *SPTA Players have won 68 High School Singles and Doubles State Titles!*

• *Over 100 Universities and Colleges represented by SPTA Players!*

• *SPTA has produced Over 50 #1 Ranked Southwest Players!*

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Note: All applicants must fill out credit card information for monthly Auto Pay

Monthly Credit Card Charge _____ I authorize SPTA to charge the card on file by the 1st of the month unless otherwise notified.

Card Holder's signature: _____ Date: ____/____/____

Total Amount Enclosed \$ _____ Start Date: ____/____/____ Days Attending: M ___ W ___ F ___



Card Holder's Name _____

Billing Address _____ Zip _____

Visa / MC # _____ Exp Date ____/____ Security Code (3-4 digit #) _____

Send Application to: SPTA % Reffkin Tennis Center 50 S Alvernon Way Tucson, AZ 85711

Billing Policy and Procedures

- All players are required to be enrolled in Auto Pay
- To cancel auto pay, an email must be sent to SPTA@reffkintenniscenter.com requesting cancellation before the start of the new month. Please ask for confirmation that we received your cancellation email...
- Because staffing is preplanned and based on enrollment, late cancellations will be assessed a \$30 service charge plus a daily tuition charge of \$25 for any class days missed before the date of the late cancellation.
- Monthly tuition is a flat fee based on 4 weeks per month, there is usually a “Free” day or two built into the monthly tuition, so there are no make-up days for missed classes for personal reasons or cancelled classes due to inclement weather. Very few classes are cancelled due to inclement weather throughout the year.
- For a documented medical injury or illness requiring rest of at least a week or more, tuition will be waived for the days missed. Medical documentation must be provided by a certified health care provider.
- With advanced notice, prorated monthly tuitions are available upon request. Please make sure to let us know the days that will be missed in advance.

I have read and agree to the Billing Policy and Procedures:

SIGNED: _____

DATE: _____

PRINT NAME: _____

THIS IS A RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

Tucson Tennis Management LLC/RST/Reffkin Tennis Center/City of Tucson (TTM/RST/RTC/COT) sponsors various tennis activities and events, including, but not limited to, tournaments, leagues, group and individual instruction, workshops, court rental and usage (each, an "Event" and collectively, the "Events").

IN CONSIDERATION of being permitted to participate in any way in the EVENT(S), EACH OF THE UNDERSIGNED, for him/herself, his/her personal representatives, heirs, and next of kin:

1. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE {TTM/RST/RTC/COT} , and all of their directors, officers, agents, volunteers and employees,(hereinafter referred to as "Releasees") FROM ALL LIABILITY TO THE UNDERSIGNED, his/her personal representatives, assigns, heirs and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFORE ON ACCOUNT OF INJURY AND/OR EXPOSURE TO INFECTIOUS SYNDROMES OR DISEASES TO THE PERSON OR PROPERTY OR RESULTING IN ILLNESS AND/OR DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENT(S), WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. BY PARTICIPATING OR ATTENDING THIS EVENT YOU ASSUME ALL RISKS WHETHER KNOWN OR UNKNOWN.
2. HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST they may incur arising out of or related to the EVENT(S) WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES or otherwise.
3. HEREBY acknowledges that THE ACTIVITIES OF THE EVENT(S) MAY BE DANGEROUS and involve the risk of exposure to infectious syndromes and diseases, serious illness, injury and/or death and/or property damage and he/she ASSUMES FULL RESPONSIBILITY FOR ANY RISK WHATSOEVER, INCLUDING BUT NOT LIMITED TO BODILY INJURY, EXPOSURE, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENT(S) whether caused by the NEGLIGENCE OF RELEASEES or otherwise.
4. HEREBY grants to the Releasees (and grants to the Releasees the right to grant to others), as well as their successors and assigns, in perpetuity, the irrevocable right (but not the obligation), with or without my knowledge, to provide individual training sessions, film, tape, photograph, record, exhibit, edit, alter, copy, reproduce, license, sell, rent, disclose, display, publish, distribute, broadcast, webcast, prepare derivative works from or otherwise preserve, use and/or exploit in any format and/or manner now known or hereafter developed, whether commercial or non- commercial in nature (collectively, the "Use and Materials"): (1) my appearance at and/or participation in the Event; (2) my name, likeness, signature, voice, singing voice, conversation, sounds, biographical data, testimonials, and/or any other information or material secured by the Releasees in connection with my appearance at and/or participation in the Event. I agree that Releasees shall have the right to the Use and Materials, for their own account, throughout the universe and in perpetuity. I acknowledge and agree that I shall not be entitled to receive any compensation whatsoever in connection with the Releasees' exercise of its Use and Materials rights.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF ALL RISK, AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

PLAYER SIGNED: _____ DATE: _____

PRINT PLAYER NAME: _____ DATE OF BIRTH (M/D/YYYY): _____

PARENT OR LEGAL GUARDIAN ACKNOWLEDGEMENT (IF UNDER THE AGE OF 18)

I represent and warrant that I am the parent or legal guardian of _____, the individual who signed the foregoing Release ("Minor") and that I have received, read, and understood the foregoing Release and Waiver. I fully consent to and voluntarily authorize the Minor to execute said Release and Waiver (or, if applicable, have voluntarily executed said Release and Waiver on Minor's behalf). I acknowledge and agree that all representations, consents, agreements, grants, waivers, authorizations, indemnifications and releases herein shall be regarded as made by me on behalf of the Minor and shall be binding on me and the Minor.

Furthermore, in consideration of Releasees possibly including me and/or Minor in the Event, I hereby agree to be bound by and to perform all of the terms and conditions of the foregoing Release and Waiver (including, without limitation, the provisions regarding release of all claims), as such terms and conditions may relate to my participation and/or the participation of the Minor in the Event, if any.

SIGNED: _____ DATE: _____

PRINT NAME: _____ RELATIONSHIP TO MINOR: _____