

**Membership Form**

|  |  |
| --- | --- |
| NAME |  |
| PARENT NAME |  |
| ADDRESS |  |
| CITY, ZIP CODE |  |
| CELL PHONE  |  |
| HOME PHONE |  |
| EMAIL |  |
| EMERGENCY CONTACT | NAME: PHONE |
| FAMILY MEMBERS |   |

 **MEMBERSHIP TYPE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | ADULT | COUPLE | FAMILY | JUNIOR |
| MONTH to MONTH(Annual Contract) | $25/Month | $45/Month | $50 | $19/Month |
| MONTH to MONTH(No Contract) | $29/Month | $49 | $60 | $25/Month |
| ANNUAL PREPAY | $140 | $325 | $375 | $125 |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| REFERRAL SOURCE |  Internet Ad Newspaper Event Person |
| Name of person who referred you |  |

**Credit Card Authorization Form**

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| --- |
| **Credit Card Information** |
| Card Type: ☐ MasterCard ☐ VISA ☐ Discover ☐ AMEX□ Other  |
| Cardholder Name (as shown on card):  |
| Card Number:  |
| Expiration Date (mm/yy):  |
| Cardholder ZIP Code (from credit card billing address):  |

I, , authorize Eola Tennis Academy Inc to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

Customer Signature Date

**Credit Card Authorization, Participant Liability Waiver, and Hold Harmless Agreement**

\_\_\_\_\_\_ 1. Eola Tennis Academy Inc, (hereafter referred to as ETA) requires a valid credit card or bank electronic fund transfer (EFT) on file with every PRIME membership. It is the responsibility of the member to make sure that ETA has a current and chargeable credit card or bank ACH that is in good standing and does not have an expired date. I understand that if my payment is late or if my credit card declines for any reason a $30 fee assessed to my credit card as a late charge.

\_\_\_\_\_\_2. I understand that PRIME membership is not refundable or transferable. Early cancellations of memberships will be assessed a cancellation fee of 50% of the remaining dues. Prepaid membership contracts may not be canceled early.

\_\_\_\_\_3. I understand that if I default I will be responsible for all attorney fees, collection costs, court fees and any other fees associated with retrieving the funds that ETA is owed for the contracted services. If payment is missed and or withheld for any reasons, ETA will require the full amount of this contract due in advance of the rest of the services being rendered. Payment will be made in full within 15 days of this default.

\_\_\_\_\_5. I understand that ETA will not put any membership on hold for any reason except for injury or illness lasting more than 3 weeks with a Physician's note.

\_\_\_\_\_6. Please read this form carefully and be aware that by registering for and participating in this program(s), or by registering your minor child / ward for participation in this program(s), you will be waiving your rights and/or the rights of your minor child / ward to all claims for injuries you or your minor child / ward might sustain arising out of this program(s) and you will be required to indemnify, hold harmless, and defend the ETA and all the employees and agents of ETA for any claims arising out of participation in said program(s).

\_\_\_\_\_7. **Risk of Injury and Waiver of Injury Claims**

“As a participant in the programs of ETA, or as a parent or legal guardian of a participant under 18 years of age, I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of injuries, including death, damages, or loss which I may sustain as a result of participating in any and all activities and programs of ETA.” “I agree to waive and relinquish any and all claims I may have arising out of, connected with, or in any way associated with the activities and programs of the ETA.”

\_\_\_\_\_8. **Release from Liability**

“I do hereby fully release and discharge the Eola Tennis Academy Inc (ETA) and Eola Tennis Buiding LLC (hereafter referred to as ETB) and its officers, guarantors, contractors, agents, and employees from any and all claims from injuries, including death, damage or loss which I or my minor child / ward may have or which may occur on account of participation in the pro-gram.”

\_\_\_\_\_\_9. **Indemnity and Defense**

“I further agree to indemnify, hold harmless and defend the ETA and ETB and its officers, guarantors, independent contractors, agents, and employees from any and all claims from injuries, including death, damages and losses sustained by me or my minor child / ward and arising out of, connected with, or in any way associated with the activities and programs of ETA.”

In the event of any emergency, I authorize ETA to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed reasonable and necessary for my minor child’s immediate care and agree that I will be responsible for payment of any and all medical services rendered.

\_\_\_\_\_\_10. **Transportation Liability Waiver**

“In consideration of my minor child/ward being allowed to be transported by automobile by a Eola Tennis Academy Staff member or independent contractors, or volunteer adult driver, as the Parent or legal guardian of a participant under 18 years of age, I recognize and acknowledge that there are certain risks of physical injury associated with being transported by automobile by a Eola Tennis Academy staff member or independent contractors. I agree to assume the full risk of injuries that may be sustained by any minor child/ward of mine, as a result of being transported by a Eola Tennis Academy staff member or independent contractors. I agree to waive and relinquish all claims on behalf of my minor child/ward that the minor child/ward may have against Eola Tennis Academy as a result of the minor child/ward’s being transported by automobile by a Eola Tennis Academy staff member, independent contractors or volunteer adult driver.

“I do hereby fully release and discharge Eola Tennis Academy Inc and Eola Tennis Building LLC and its officers, guarantors, agents, independent contractors and employees from any and all claims from injuries, damage or loss which I, or any minor child/ward may have or which may occur to my minor child/ward on account of his/her being trans-ported by automobile by a Eola Tennis Academy staff member, independent contractors or volunteer adult driver. I further agree to indemnify and hold harmless and defend Eola Tennis Academy Inc, Eola Tennis Building LLC, its officers, it's guarantors, its agents, it's independent contractors and employees from any and all claims sustained by me or my minor child/ward, and arising out of, connected with, or in any way associated with being transported by automobile by a ETA staff member, independent contractors or volunteer adult driver.”

\_\_\_\_\_\_11. **Promotional Release**

“I hereby authorize ETA and any of its authorized agents to use my child’s photograph for any electronic or non-electronic form or media for promotional purposes.”

**SIGN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **(Parent, Guardian, Adult Participant)**

My signature below indicates that I have read this entire PRIME membership agreement, including the waiver and release and ETA's rules and policies, and that the staff has answered any questions I might have regarding this membership agreement to my satisfaction. Furthermore, by my signature below, I am fully accepting responsibility for my or above said minor’s actions as it pertains to this PRIME membership agreement and my or above said minor’s actions as a PRIME member of ETA.