



Tournament Training Team

Registration form

Participant's Name: _____
Last Name First Name Middle Initial

Home Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone #: (_____) _____ Work Phone #: (_____) _____
(Please include Country if applicable and City Codes)

Cell Phone #: (_____) _____

Email Address: _____

Parents Name: _____ Emergency contact : _____

Emergency Ph: _____ Emergency Cell: _____

Program registering for: Afternoon _____ Morning _____ Full day _____

For afternoon program: Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Payment method: Check/Cash/CC

Name of Credit Card _____ Exp _____ Amount _____

Credit Card # _____ CID # _____

Waiver

As a parent or guardian of a minor child participating the ZMG Junior Program I hereby waive any claim against Zenith Management Group, LLC or it's directors, affiliates, employees hereafter arising from injuries to above said child , which said injury is sustained while upon said facilities , participating in said activities, regardless of whether such injury is caused in whole or in part by the negligence of Zenith Management Group, LLC or by the negligence of or it's directors, affiliates, employees and I do covenant to indemnify, hold harmless and defend the Zenith Management Group, LLC and it's directors, affiliates, employees from any claim, damages or demand hereafter the negligence of the Zenith Management Group, LLC or by the negligence of it's directors, affiliates, employees.

I hereby give the permission to Zenith Management Group, LLC to call my physician and/or arrange for transportation to a hospital. In the event of an injury to said child, although I understand that Zenith Management Group, LLC assumes no responsibility to do so.

By signing this waiver I also authorize Zenith Management Group, LLC and its affiliates the right to use photos/video of the above mentioned child/children for advertising and on their website.

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Costs and Terms



	Length	1 day	2 days	3 days	4 days	5 days
Afternoon 4:00pm To 6:30pm	Weekly	100	175	250	325	375
	4 week session	NA	NA	850	1000	1200
	12 week session	NA	NA	2175	2750	3125
Fitness 7:00am To 8:00am	Weekly	50	90	130	160	175
	Monthly	NA	NA	475	600	725
Morning	ZMG's morning program is an individually designed program for each player. For more information and to meet with the Directors about designing a program please email info@zmgboca.com					
ZMG Training Team Package	Monthly	NA	NA	NA	NA	1750
	Including morning fitness	NA	NA	NA	NA	2000
	Includes: Free restringing labor, Coach presence at one USTA tournament per month, ZMG uniform items free of charge, one hr private lesson per week . *Please note: no make ups for missed classes or lessons during the monthly period. Payment due at beginning of month					

* for middle school students beginning at 4:30pm charge is 80% of above totals

Terms/Policies

- A minimum of 1 week's tuition payment is required to be paid by the time of reservation to guarantee your place in the program.
- All balances must be paid in full at least by the beginning of the first week of a session.
- Any session not paid in advance will be invoiced at the weekly rates and incur a 10% service charge
- Weekly and session rates will not be pro-rated daily.
- Zenith Management Group, LLC is not responsible for lost or stolen articles or money. DO NOT bring valuable items.
- Make up classes can only be guaranteed for rain days, missed classes will be handled on an individual basis, but the makeup of missed classes for reasons other than rain or medical reasons cannot be guaranteed.
- Make up classes must be taken before session paid for ends
- No make ups for ZMG Training Team Monthly Package
- Cancellations due to medical reasons will be handled on an individual basis depending upon circumstances involved.

• I certify that I am the Participant and/or the parent of the Participant and agree to these terms, policy and waiver as evidenced by my signature below.

Participant or
Parent/Guardian's Signature: _____ Date: _____