



The Club of Riverdale
TENNIS. SPA. FITNESS.

TCR THE CLUB OF RIVERDALE

2600 NETHERLAND AVE.

RIVERDALE, NY 10463

PH: 718 796 9099 EML: info@tcr-nyc.com

Program Application & Confirmation

Student First Name _____ Student Last Name _____

Address _____ # _____ City _____ State _____ Zip _____

Primary Email _____ Primary Phone _____

Gender _____ Birthday _____ / _____ / _____ Age _____ School _____ Grade (as of 9/20) _____

Parent Name _____ Cell _____

Parent Name _____ Cell _____

Emergency Name _____ Cell _____

Emergency Relationship _____ Round Trip Transportation? Yes _____ No _____

Special Needs/Medications/Allergies/Food Restrictions: _____

How did you hear about TCR? Referral Name _____ Web _____ Vehicle _____ Postcard _____

LEARN & PLAY OPTIONS

AFTER-SCHOOL PROGRAM

Grade: Pre-k to 5th

Day's Per Week	Program Cost	W/Return Transport
2	\$5500	\$6350
3	\$6450	\$7685
4	\$7135	\$8770
5	\$7450	\$9410

14 WEEK DAYTIME PROGRAM

Grade: Pre-k to 5th

1 Day/wk: \$1700 2 Days/wk: \$3400 2/3 Days/wk: \$3890

Number of Days: Week A: _____ Week B: _____

Week A Day(s): MON TUE WED THU FRI

Week B Day(s): MON TUE WED THU FRI

Total Cost: \$ _____

After School: 2 DAYS 3 DAYS 4 DAYS 5 DAYS

Choose Day(s): MON TUE WED THU FRI

Add-ons (Save 10%): JR TENNIS SWIM SCHOOL JR GOLF TCR CAMPS

Choose Duration: 60 MINS 30 MIN # of CAMP WEEKS _____

Enter Time(s): _____

Choose Transport: WITH-OUT TRANSPORT WITH TRANSPORT P/U ONLY D/O ONLY

Payment Information

After School Fee: \$ _____
With Return Transport: \$ _____
Total fee: \$ _____
Deposit: \$ _____
Balance: \$ _____

Payment by: CASH CHECK CREDITCARD
CREDIT CARD TYPE: MC VISA DIS AMEX
CREDIT CARD NUMBER: _____
EXP DATE: ____ / ____ CVV: _____

AFTERSCHOOL PAYMENT INFORMATION

Nine Payments: (Aug 1st 2021– May 1st, 2022)

Payment Amount: \$ _____
First Payment Date: _____
Last Payment Date: _____

L&P DAYTIME PAYMENT INFORMATION

Two Payments: (Oct 1st 2021– Nov 1st, 2021)

Payment Amount: \$ _____
First Payment Date: _____
Last Payment Date: _____

ADD-ONS PAYMENT INFORMATION

Six Payments: _____ (July 1st – Dec 1st, 2021)

Payment Amount: \$ _____
First Payment Date: _____
Last Payment Date: _____

Daytime Fee: \$ _____
Total Fee: \$ _____
Deposit: \$ _____
Balance: \$ _____

ADD-ONS:
Program fee: \$ _____
Transport: \$ _____
Total fee: \$ _____
Min. Deposit of 25%: \$ _____
Balance: \$ _____

Payment Terms & Liability Waiver

I understand that this application must be accompanied by the required non-refundable deposit to confirm registration. I agree that once the deposit is paid, under no circumstances will it be refunded. I accept that enrollment in TCR THE CLUB OF RIVERDALE program is for the full session and that no refunds will be given for withdrawals or absences.

By signing below I agree that I am either the named participant, or the parent or legal guardian of the named participant, and that we will abide by all rules and regulations which now exist or which may be hereafter adopted or amended by the Club. I further acknowledge and agree that there are certain inherent dangers in playing tennis/swim/golf and that the Club shall not be liable for any personal injuries, illnesses, property damage, or other loss sustained by me or the named participant in, on or about the premises of the Club, or arising out of the use or intended use of any facilities, equipment or other property of the Club. If I enroll, or enroll my child(ren), in Club programs and am asked to furnish the Club with appropriate medical exams, I agree to furnish such exams and records. In addition, in case of accident or injury to me or my child(ren) and if an emergency contact person cannot be reached, I grant the Club permission to obtain medical attention if necessary, for which I will be financially responsible. The Club reserves the right to close courts for repair or alterations. The Club reserves the right to cancel this contract at any time, at its sole discretion, and management's sole liability shall be to refund any amounts previously paid on a pro-rata basis. TCR THE CLUB OF RIVERDALE retains the rights to any photographs or video taken at the facility to be used for publicity or advertising.

Parents Signature: _____ Date: _____ Print Name: _____

Please mail or email to TCR to confirm enrollment!
TCR THE CLUB OF RIVERDALE
Address: 2600 Netherland Ave. Bronx NY 10463
info@tcr-nyc.com